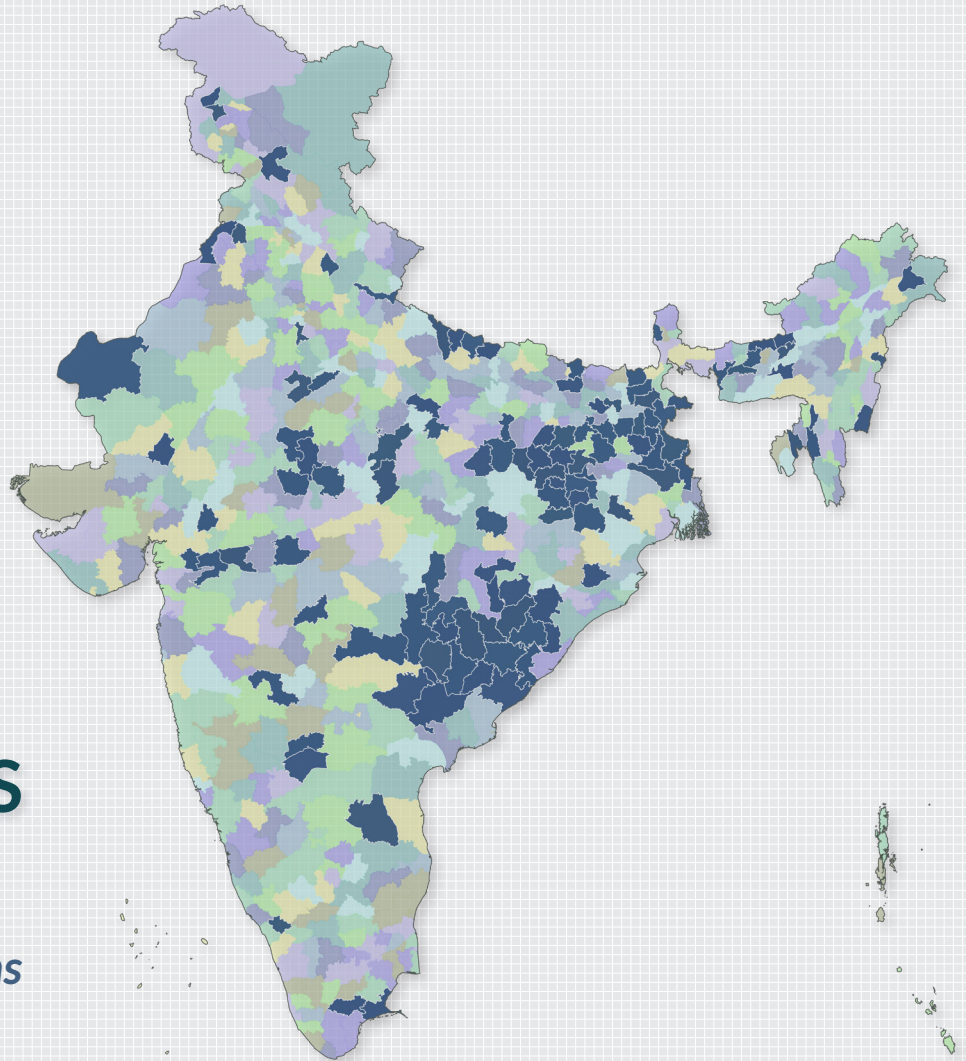




Geo-visualising DIET, ANTHROPOMETRIC AND CLINICAL INDICATORS for Children in India

Enabling District Prioritisation for Interventions



The Harvard Center for Population
and Development Studies



INSTITUTE OF ECONOMIC GROWTH

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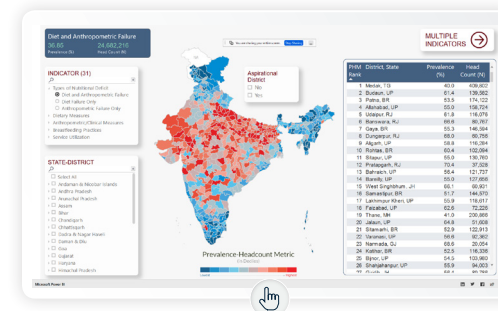
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Design and Layout

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Available at: <https://geographicinsights.iq.harvard.edu/IndiaNutritionDistrict>



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Disclaimer

The views expressed in this report are those of the authors and do not necessarily reflect the views and policies of National Institution for Transforming India (NITI) Aayog, Harvard Center for Population and Development Studies and Institute of Economic Growth.

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MESSAGE



Dr. Rajiv Kumar

Vice-Chairman
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Despite the continuous and concerted efforts being made by the Government of India to tackle health and nutritional issues, there have remained major challenges. Valid, timely and reliable data is essential for understanding the complexities of health and nutritional challenges and enabling researchers and policy makers to frame the necessary policy response.

Recently, the summary estimates for selected indicators of health and nutrition from the fifth round of the National Family Health Survey (NFHS) conducted in 2019 for 17 States and 5 Union Territories (UTs) were released. These statistics suggests that the efforts that the Government of India has undertaken in recent years have to be further upscaled and upgraded in reducing the burden of undernutrition among Indian children.

Notwithstanding the immense value of utilising the summary data made available by the fifth NFHS for specific states, it is important to note that a truly all-India picture covering all districts of India will not be available at least until the later part of 2021. The data collection process which had to be suspended due to COVID-19 has only now been resumed in the remaining 12 States and 2 UTs. Even as we await the availability of disaggregated data, there remains much to be learned from a more creative and granular examination of the fourth round of the NFHS conducted in 2015-16, especially as it relates to the issue of nutritional status.

In this context, it gives me immense pleasure to note that Professor SV Subramanian and his team at the Geographic Insights Lab at the Harvard Center for Population and Development Studies, in collaboration with researchers at the Institute of Economic Growth have stepped in to providing what constitutes a comprehensive and granular assessment of nutritional status of children in India. Using the disaggregated data from the fourth NFHS, they have compiled an atlas on 31 nutritional indicators that include diet, anthropometry, clinical and service utilisation measures of nutrition for the districts of India. The geo-visualisations are presented with a motivation to help various stakeholders prioritise indicators and districts for interventions. Crucially, the team at Geographic Insights Lab also has developed an accompanying interactive dashboard that is publicly available. Analysis such as what is presented in the atlas and dashboard are examples of a constructive engagement to advance the ultimate goal of eliminating the burden of undernutrition among our children.

I believe this effort, in its broader contribution, will serve as an educational and informational tool, and will serve as a resource to sharpen the focus on program implementation and policy making.



(Dr. Rajiv Kumar)

KEY MESSAGES

Include Headcount Metric in Nutrition Monitoring

- Variation across districts in terms of prevalence and headcount burden of nutritional deficit can produce different rankings and inferences.
- Districts with high prevalence may need priority attention while at the same time districts with moderate or low prevalence may have a large number of undernourished children.
- Planning for interventions can be improved by recognising high-prevalence districts as well as those with a large number of undernourished children.
- Both the prevalence and headcount metrics should be integrated for district-level targeting and prioritisation.

Complement Aspirational Districts Focus with Indicator-specific Priority Areas

- Aspirational districts are identified based on a composite index of various development indicators. Priority districts based on specific indicators, such as those pertaining to nutrition, may not necessarily overlap with identified aspirational districts.
- Policies and programmes based on the indicator-specific approach can refine the selection of target districts for action by jointly considering composite as well as indicator-specific priority rankings.
- This would allow for a synergistic harnessing of different programmes that focus on a mutual concern, such as nutritional outcomes.

Discovering Geographical Blind Spots and Positive Deviants

- There exists high-burden districts that are geographically adjacent to low- to moderate-burden districts (“blind spots”).
- There also exists low- to moderate-burden districts that are geographically adjacent to high-burden districts (“positive deviants”).
- Identifying blind spots as well as positive deviants should enable opportunities to learn and improve the design and implementation of nutritional intervention.

Complement Anthropometric Measures with Diet-related Measures

- Dietary deficits among children is substantially larger than the anthropometric deficits.
- Food security and adequate dietary intake are both important concerns.
- Adequate balance of macronutrient (diets) and micronutrient intake is necessary for overall child health and development.
- A focus on ensuring access to high quality and affordable food should enable achieving the desired goal of eliminating the burden of undernutrition among children.

STATEMENT OF THE PROBLEM

Nutritional well-being is central to the all-round development of individuals and societies.¹ Adequate nutritional intake is not just an intrinsic requisite for a healthy life,² but is also instrumental for human capital formation, productivity gains.³

The joint group of the World Health Organization (WHO), United Nations Children's Fund (UNICEF) and the World Bank estimates that globally 144 million (21.3%) children below 5 years of age are stunted, 38 million (5.6%) are underweight and 47 million (6.9%) are wasted.⁴

Two out of every five stunted children (0-59 months) in the world are from South Asia. Low- and middle-income countries together account for 64% of the global stunting burden.⁴ The nutritional status of children in India fares much worse in global comparisons, as is apparent from various international indices and rankings.⁵

According to 2020 Global Nutrition Report,⁶ India has the highest number of under-five stunted children across the world. The report further states that India accounts for one-third (31%) of the global burden of child wasting.⁶ Evidence from India and other developing countries suggests that economic growth on its own has little to no impact on reducing child undernutrition.⁷⁻⁹

Anthropometry is the most commonly used approach for assessing nutritional needs among children. Anthropometric measurements based on height and weight represent important diagnostic criteria to study nutritional status of children. Anthropometry alone, however, cannot differentiate between the two immediate causes of undernutrition: inadequate diet vs disease. It is disconcerting

that half of the children below 5 years of age in India are either stunted or underweight or wasted.¹⁰⁻¹²

In addition to anthropometric deficits, dietary shortfall among children remains a major concern. Typically, dietary shortfall have been measured in terms of diet adequacy and diversity, with the high prevalences being observed on both measures.¹³

In a recent study, it was observed that the nutritional status of children in India appears considerably worse using measures based on failures in dietary diversity, as compared to measures based on anthropometry.¹⁴ Considering nutritional status using a typology of both dietary diversity and anthropometric failures was found to be valuable in identifying groups that otherwise may have been missed, such as children who experienced dietary diversity failure but no anthropometric failure. Such typology also helps highlight groups that may need most immediate priority (e.g., children experiencing both dietary and anthropometric failures).¹⁴

Additionally, the prevalence of composite index of anthropometric failure,¹⁵ which is an aggregated figure of the number of undernourished children in a population, indicate that a high number of children with multiple anthropometric failures are at a greater risk of morbidity and are more likely to come from poorer households in India.^{15,16}

Apart from diet, a number of socio-economic factors determine the prevalence of undernutrition.¹⁷ Maternal education, wealth, and overall household socioeconomic status are strongly correlated with the prevalence of different indicators of undernutrition as well as dietary patterns among children.¹⁸⁻²²

POLICY RESPONSE TO THE PROBLEM

Child undernutrition is widely recognized by Central and State governments as a longstanding development concern of India.

The Integrated Child Development Services (ICDS) scheme launched in 1975 specifically aims to promote child health and development across communities through a network of over 1.3 million Anganwadi Centres (AWCs) across villages and urban wards. ICDS adopts a holistic approach for universal coverage of various services for women who are pregnant and/or breastfeeding as well as children up to 6 years of age.

These services include supplementary nutrition provisioning, pre-school and non-formal education, nutrition and health education, immunization services, health check-ups and other referral services. The AWCs are managed by grassroots level functionaries Anganwadi Workers (AWWs) and Anganwadi Helpers (AWH).

However, ICDS still needs to overcome the historical challenges of geographic and socioeconomic inequalities in access to various services under its umbrella scheme.²³

To accelerate reductions of undernutrition, the Government of India launched POSHAN Abhiyaan (Prime Minister's Overarching Scheme for Holistic Nourishment) in 2018. POSHAN Abhiyaan placed a renewed emphasis on program governance and implementation to achieve goals of a 2% point annual reduction in the prevalence of child stunting and underweight (0-6 years of age).

POSHAN Abhiyaan seeks to harness multisectoral synergies towards addressing ground-level challenges in program delivery via well-conceived Convergence Action Plans (CAP). POSHAN Abhiyaan envisaged the concept of *Jan Andolan* to further encourage wider community participation (behavioral aspects) on nutrition with an exclusive focus on adopting nutrition-promoting interventions during the first 1000 days of a child's life (including pregnancy).²⁴

At the launch of POSHAN Abhiyaan, an initial outlay of Rs. 9046 crores were dedicated to the program by the Government of India for a span of three years. In addition to this, other development initiatives such as the Transforming Aspirational Districts Programme (TADP) have complemented this effort by supporting policy implementation across 115 aspirational districts (ADs) of the country.²⁴

The action against undernutrition is palpable across various development sectors and has been widely supported by a range of development partners including national and international organizations as well as private sector entities.

India is currently at the most opportune moment in recent history to accelerate the rate of reductions in child undernutrition. However, much of India's ability to do so relies on strategic navigation for prioritisation and targeting across the vast demographic and geographic landscape of the country as outlined by recent studies.²⁵⁻²⁸

GEOGRAPHIC PRIORITISATION

Prioritisation of specific geographic areas for interventions and resource allocations is a crucial component of precision policy making undertaken by the Government of India.²⁸ We discuss three perspectives that are critical for enabling prioritisation of interventions: the choice of geographical policy unit, the choice of metric and the targeted nutrition indicator.

District as a Policy Unit

Districts are the sub-units of states and serve as the principle administrative unit for policy design, program implementation and monitoring in India.²⁴ Several initiatives of the Government of India such as POSHAN Abhiyaan and Transforming Aspirational Districts (AD) Programme, exemplify the significance of districts as a salient geographical policy unit for prioritisation.

The 115 ADs by the National Institute for Transforming India (NITI Aayog) are based on an empirical index derived from a range of development indicators across **five important domains**: health and nutrition; education; agriculture and water resources; financial inclusion and skill development; and basic infrastructure.²⁴

While this index-based targeting approach is valuable for supporting a truly integrated, multi-sectoral programme, priority districts based on composite measurements of multiple health indicators may not be appropriate for choosing a specific intervention.

Choice of Metric

The choice of metric—prevalence or headcount—to review and monitor an indicator has far greater relevance than what is usually accorded while prioritising target areas. In India and elsewhere, ratio-based prevalence—computed as the number of cases with

certain conditions relative to the total population—is by far the most widely used metric for ranking disease burden across different population groups.

At the policy level, geographical units (districts in India) with relatively higher prevalence are accorded priority for interventions. Importantly, the ADs were also identified based on the prevalence measures of several socio-economic indicators.²⁴

However, exclusive focus on the prevalence metric can at times miss the target that is most in need of intervention. For example, an elementary concern with ratio-based prevalence measures is that they overlook the absolute numbers of the deprived population. The absolute numbers are critical for estimating the resources required in order to reduce the current nutritional shortfall.

A few studies on urbanization, poverty, and education acknowledge this concern and propose alternative indices based on both the metrics (prevalence and headcount).^{29–33}

The importance of the choice of metric is empirically validated by a recent study that unraveled the conflicts in district rankings in child undernutrition in India on the basis of three metrics, namely, prevalence (P), headcount (H) and alternatives such as a mixed index ($PH^{(1/2)}$) that combines both metrics through a weighing structure.²⁵ The study concluded that the ranking of districts for the burden of child undernutrition can vary significantly between prevalence, absolute headcount and the mixed index with wide-ranging policy implications.

Given these intricacies, an effective strategy to prioritise high burden areas is critical for achieving desired policy goals. Thus, it is essential to consider the burden of child undernutrition across metrics, indicators and geographic units.

OBJECTIVES

The report identifies and provides a detailed view of high priority districts for targeting nutritional interventions for children in India. The report has the following objectives:

- To present child nutritional status across Indian districts for 31 nutritional indicators, with a motivation to provide an exhaustive set of policy-relevant nutrition indicators for better comparisons and targeting.
- To present a comprehensive picture of the problem of child undernutrition by applying a combined 'prevalence-headcount metric' which accounts for both prevalence as well as absolute headcount numbers.
- To present a geographic visualisation of the nutrition indicators that provides a snapshot of district variations based on prevalence-headcount metric.
- To present a state-wise distribution of districts based on the prevalence-headcount metric. This information can assist policymakers, district officials and stakeholders to direct the interventions towards those districts with the highest burden of nutritional shortfall.
- To present top 100 priority districts based on the prevalence-headcount metric and the share of the total headcount burden attributable to priority districts.
- To present the prevalence and absolute headcount for the nutritional indicators for the ADs of India.

DATA SOURCE AND DESIGN

The data were obtained from the fourth round of National Family Health Survey (NFHS-4) – India's version of the multi-country Demographic and Health Surveys³⁴ – conducted between January, 2015 and December, 2016.¹³ For the first time, the sample data collection strategy was designed to represent each of the districts in India.

Since the NFHS-4 used the Census of India 2011 sampling-frame of 640 districts from 29 states and 7 Union Territories (UTs) of India,¹³ our analysis and visualisations are for the 640 districts and not for the latest number of districts. Consequently, information on all ADs is not available. The number of ADs also vary depending on program expansion or district participation.

TARGET POPULATION AND SAMPLE SIZE

The NFHS-4 covers children aged 0-59 months living in 640 districts.¹³ After excluding children with missing observations, 225,002 children were analysed for estimating anthropometric status. For anaemia and no vitamin-A supplementation, estimates were computed for 209,495 children aged 6-59 months. For dietary deficit measures, 74,078 children aged 6-23 months were considered. For no initiation of breastfeeding and no exclusive breastfeeding, 49,914 and 48,173 children, respectively, born in the year preceding the survey were analysed. For supplementary food utilisation estimates, 197,830 children aged less than 36 months (no take home ration) and 97,305 children aged 3 to 6 years (no hot cooked meal) were considered.

MEASURING NUTRITIONAL STATUS

The report covers the following domains: diet, anthropometric and clinical measures, breastfeeding practices and service utilisation indicators (Tables 1 and 2).

Diet Measures

Children without Minimum Dietary Diversity (MDD): A child was said to have MDD if he/she was fed from at least four of the following food groups: (a) infant formula, milk other than breast milk and cheese or yogurt or other milk products; (b) foods made from grains or roots including porridge or gruel, fortified baby food, beans, peas and lentils or nuts; (c) vitamin-A rich and other fruits; (d) dark green leafy and other vegetables; (e) eggs; (f) fish or shellfish; (g) meat, poultry or organ meats.¹³ The MDD among children was based on 24-hour recall.

Children without Minimum Acceptable Diet (MAD): MAD is a binary variable which is a combination of MDD and Minimum Meal Frequency (MMF) with different cut-offs for breastfed and non-breastfed children. For 6 to 8 months old infants, breastfed children were said to have MMF if they received solid, semi-solid foods, or soft foods at least twice a day, and three times a day for children aged 9-23 months.¹³ Non-breastfed children (6-23 months) were said to have MMF if they receive solid, semi-solid foods, or soft foods at least four times a day. Finally, a binary indicator (No-1/ Yes-0) was constructed for children without MAD. A breastfed child aged 6-23 months is said to have MAD if it was reported that they received at least the MDD and MMF during the previous day. The cut-off for non-breastfed children (6-23 months) for MAD was at least two milk feedings and minimum dietary diversity

(not including milk feeds), and minimum meal frequency during the previous day.¹³ We also present shortfalls by each food group (Tables 1 and 2).

Indicators are binary with negative values as 1 and positive values as 0, so that a higher estimate will reflect a worse-off situation while a lower estimate depicts a better-off situation.

Anthropometric and Clinical Measures

Stunting: Children were measured for their recumbent length (for those below 24 months of age) or standing height (for those between 24 to 59 months of age). The height measurements on each child were transformed into age- and sex-specific z-scores using the WHO child growth standards.³⁵ Children were considered to be stunted or severely stunted if their height-for-age z-scores were less than minus 2 or 3 standard deviation, respectively, from those of healthy children.

Underweight: The weight of the children was measured and recorded by trained and skilled field investigators. The weight measurements of sample children were computed into age- and sex-specific z-scores using the WHO child growth reference standards.³⁵ Children were considered to be underweight or severe underweight if their weight-for-age z-scores were less than minus 2 or 3 standard deviation, respectively, from those of healthy children.

Wasting: Raw height and weight measurements of children were used to construct weight-for-height z-scores and those who had weight-for-height z-scores less than minus 2 or 3 standard deviation, respectively, from those of healthy children.³⁵

Types of Anthropometric Measures: Children experiencing more than one anthropometric deficit are likely to suffer from a greater nutritional deficit compared to children with a single anthropometric deficit. A child suffering from both stunting and underweight may reflect higher severity than the one who is only underweight. Such intricacies are important to consider while identifying high burden districts. We cross-classify the three anthropometric status (*i.e.*, stunting, underweight and wasting) to seven mutually exclusive groups.^{15,16}

Low Birth Weight: A child is said to have low-birth weight if the written weight-record at the time of birth was less than 2.5 kg. Only children with a written record of weight at the time of birth were considered.¹³

Anaemia: Blood specimens for hemoglobin testing were collected by trained health investigators with parent/guardian consent or an adult responsible for the respective child. Blood samples were drawn from a blood-drop taken from a finger prick (or a heel prick for children aged 6-11 months) and collected in a micro cuvette. Children with hemoglobin levels of less than 11.0g/dl were considered to be anaemic and those with levels of less than 7.0 g/dl to be severely anaemic.

Types of Nutritional Deficit

Following a recent study,¹⁴ we estimated combinations based on anthropometric- and diet-related shortfalls. Specifically, we provide estimates for children who suffer from only anthropometric deficits (any) and no dietary deficit; children who suffer from only dietary deficit (any) and no anthropometric deficits; and children with both anthropometric-based as well as diet-based deficits.

Breastfeeding Practices

No Early Breastfeeding: Early initiation of breastfeeding is important for both the mother and the child.¹³ In order to minimise recall bias for this analysis, we restricted this indicator for children born in the year preceeding the survey. Early initiation is defined as children who were not put to the breast immediately or within one hour after birth.

No Exclusive Breastfeeding: Breast Milk contains all of the nutrients needed by children in the first six months of life and is an uncontaminated nutritional source.¹³ In order to minimise recall bias for this analysis, we restricted this indicator for children born in the year preceeding the survey. No exclusive breastfeeding is defined as children who were not exclusively breastfed for the first six months of their life.

Service Utilisation

No Take Home Ration and No Hot Cooked Meal: Children below six years are eligible to receive supplementary food from Anganwadi Centres. The supplementary food includes take home ration for children 6 to 36 months and hot cooked meals for children between 36 months to 72 months.¹³ We present the percentage of children who did not receive take home ration and percentage of children who did not receive hot cooked meal.

No Vitamin-A Supplementation: Vitamin-A is an essential micronutrient health and its deficiency emerge in environments where fresh fruits and vegetables are not readily available.¹³ Thus, vitamin-A supplementation is recommended for children 6-59 months. We estimated the prevalence of children aged 6-59 months who did not receive vitamin-A supplements in the six months preceding the survey.

Table 1: Nutritional Indicators, Eligible Age Category and Definition

INDICATOR	AGE GROUP	DEFINITION
Types of Nutritional Deficit		
Diet and Anthropometric Failure	6-23 months	Children with both dietary as well as anthropometric failures
Diet Failure Only	6-23 months	Children with at least one or more dietary failures but no anthropometric failure
Anthropometric Failure Only	6-23 months	Children with at least one or more anthropometric failures but no dietary failure
Diet Measures		
Inadequate Diet	6-23 months	Children who did not receive minimum acceptable diet
Inadequate Diet Diversity	6-23 months	Children who did not receive minimum dietary diversity
No Solid/Semi-Solid Food	6-23 months	Children who did not consume solid or semi solid food in the day or night preceding the interview
No Dairy	6-23 months	Children who did not consume milk and milk products in the day or night preceding the interview
No Nuts/Legumes	6-23 months	Children who did not consume nuts and legumes in the day or night preceding the interview
No Grains/Roots/Tubers	6-23 months	Children who did not consume grains in the day or night preceding the interview
No Eggs	6-23 months	Children who did not consume eggs in the day or night preceding the interview
No Flesh Foods	6-23 months	Children who did not consume fish, chicken, meat in the day or night preceding the interview
No Vit-A Rich Fruits/Vegetables	6-23 months	Children who did not consume vit-A rich fruits and vegetables in the day or night preceding the interview
No Other Fruits/Vegetables	6-23 months	Children who did not consume other fruits and vegetables in the day or night preceding the interview
Anthropometric and Clinical Measures		
Stunting or Underweight or Wasting	0-59 months	Children who are either stunted, wasted or underweight
Stunting & Underweight & Wasting	0-59 months	Children who are stunted, underweight and wasted
Stunting & Underweight	0-59 months	Children who are stunted and underweight but not wasted
Underweight & Wasting	0-59 months	Children who are underweight and wasted but not stunted
Stunting	0-59 months	Children who are stunted (short height-to-age)
Severe Stunting	0-59 months	Children who are severely stunted (short height-to-age)
Underweight	0-59 months	Children who are underweight (low weight-to-age)
Severe Underweight	0-59 months	Children who are severely underweight (low weight-to-age)
Wasting	0-59 months	Children who are wasted (low weight-to-height)
Severe Wasting	0-59 months	Children who are severely wasted (low weight-to-height)
Anaemia	6-59 months	Children with a hemoglobin level less than 11.0 g/dL
Severe Anaemia	6-59 months	Children with a hemoglobin level less than 7.0 g/dL
Low Birth Weight	0-59 months	Children with a written record of birthweight less than 2.5 kg
Breastfeeding Practices		
No Early Breastfeeding	0-12 months	Children who were not breastfed within 1 hour of birth
No Exclusive Breastfeeding	0-12 months	Children who were not exclusively breastfed
Service Utilisation		
No Hot Cooked Meal	> 36 months	Children who did not receive supplementary nutrition under ICDS
No Take Home Ration	6-36 months	Children who did not receive supplementary nutrition under ICDS
No Vit-A Supplementation	6-59 months	Children who did not receive Vit-A dose in the six months preceding the survey

Table 2: Descriptive Statistics for Nutritional Indicators

Indicator	Mean (%)	PREVALENCE (%)				HEADCOUNT (N)			
		Minimum	25th percentile	75th percentile	Maximum	Minimum	25th percentile	75th percentile	Maximum
Types of Nutritional Deficit									
Diet and Anthropometric Failure	39.6	2.5	25.4	47.6	70.4	48	6,960	29,359	116,463
Diet Failure Only	31.5	1.3	25.8	38.4	67.5	85	6,599	22,091	77,881
Anthropometric Failure Only	10.3	0.0	6.1	13.4	38.8	0	1,657	6,430	44,700
Diet Measures									
Inadequate Diet	90.4	56.4	86.3	95.5	100.0	212	20,702	63,889	258,315
Inadequate Diet Diversity	78.0	20.1	68.0	87.0	98.9	193	16,186	53,723	207,737
No Solid/Semi-Solid Food	24.0	1.2	14.7	29.7	51.3	56	4,106	16,727	83,578
No Dairy	48.8	15.3	37.7	60.7	89.5	122	10,245	34,854	127,085
No Nuts/Legumes	86.5	33.2	78.6	93.1	100.0	212	18,561	59,312	244,996
No Grains/Roots/Tubers	29.9	6.6	21.0	36.4	66.0	75	5,578	21,338	104,877
No Eggs	85.3	20.5	77.4	96.0	100.0	166	18,072	59,120	232,927
No Flesh Foods	89.8	36.0	82.1	97.2	100.0	201	20,029	62,796	236,704
No Vit-A Rich Fruits/Vegetables	59.8	14.4	46.9	69.2	91.7	166	11,680	43,088	179,764
No Other Fruits/Vegetables	75.6	33.1	66.0	83.5	98.9	201	15,206	52,633	221,227
Anthropometric and Clinical Measures									
Stunting or Underweight or Wasting	55.3	21.0	44.0	62.0	79.0	329	37,136	138,417	583,028
Stunting & Underweight & Wasting	6.6	0.0	3.0	8.0	21.0	0	2,871	18,158	95,578
Stunting & Underweight	18.3	3.0	11.0	21.5	36.0	69	9,603	45,845	178,456
Underweight & Wasting	8.2	0.0	6.0	10.0	22.0	0	5,415	20,735	105,136
Stunting	38.4	13.0	28.0	44.0	65.0	275	23,918	96,809	372,756
Severe Stunting	16.2	2.0	10.0	20.0	42.0	115	8,355	40,842	178,456
Underweight	35.7	6.0	24.0	42.0	67.0	99	20,625	92,059	391,872
Severe Underweight	11.0	0.0	6.0	14.0	33.0	0	4,977	29,472	133,810
Wasting	21.0	2.0	15.0	25.0	47.0	61	14,853	53,657	277,177
Severe Wasting	7.4	0.0	5.0	10.0	28.0	0	4,680	18,833	93,655
Anaemia	58.5	7.9	47.0	67.9	95.8	322	35,302	132,408	479,849
Severe Anaemia	1.6	0.0	0.4	2.2	24.6	0	352	3,418	27,398
Low Birth Weight	18.2	2.0	14.0	21.0	44.0	99	13,096	44,607	200,715
Breastfeeding Practices									
No Early Breastfeeding	41.2	10.0	31.0	59.0	92.0	65	6,601	19,556	129,626
No Exclusive Breastfeeding	68.0	24.0	60.0	75.0	94.0	135	10,308	33,242	150,907
Service Utilisation									
No Hot Cooked Meal	59.0	7.0	42.5	72.0	98.0	483	23,790	95,642	475,554
No Take Home Ration	48.0	8.0	28.0	62.0	96.0	351	11,873	55,413	346,462
No Vit-A Supplementation	40.7	6.4	28.5	51.7	86.3	287	22,306	93,156	362,423

ESTIMATION OF NUTRITIONAL STATUS

We estimated each of the nutritional status indicators along two dimensions of Prevalence (**P**) and Headcount (**H**), and combined them to derive a Population-Headcount Metric (**PHM**).

Prevalence

The metric **P** was calculated as children with nutritional deficit (*q*) divided by the eligible sample of children (*n*) in the district (*j*) and expressed in percentage as:

$$P_j = (q_j/n_j) \times 100$$

The **P** metric quantifies the risk of a child experiencing nutritional deficit in a district. For example, in the Kupwara district of Jammu and Kashmir, 137 (*q*) out of 435 (*n*) sample of eligible children were stunted, translating into a district prevalence of 31.5%; in other words, one out of every three children is at risk of being stunted. Thus, the **P** metric helps identify districts where the future risk of a specific nutritional deficit should be reduced.

However, the **P** metric does not contain any information on the absolute number of children at risk. For example, consider the districts of Hyderabad (16.7%) and South Garo Hills (16.6%); both have the same **P** metric but differ with regards to their under-five population of 398,513 and 23,953, respectively, translating to vastly different levels of current absolute burden.

Headcount

The metric **H** is given as the product of **P** and the total eligible population *N* for each district.

$$H_j = P_j \times N_j$$

Returning to the above example, the number (**H**) of stunted children is substantially larger in Hyderabad (66,553) than in South Garo Hills (3,970) despite both districts having the same prevalence. This is due to the fact that the total population burden in Hyderabad is more than fifteen times larger than South Garo Hills.

To generate district-wise estimates of headcount burden, the population figure for 2015 were obtained from the report of the technical group on population projections for India and states for 2011-2036.³⁶ The ratio of population of each district to total population of the respective state was estimated based on age group information from Census of India 2011.

Prevalence-Headcount Metric

We developed a combined Prevalence-Headcount Metric (**PHM**) that takes into account the features of both the risk (**P**) as well as the current burden (**H**) to provide a comprehensive picture of nutritional deficit in a district. We computed the **PHM** using the following steps. We exemplify these steps using the district of Kupwara, Jammu and Kashmir for the indicator of stunting.

P = Prevalence; **H** = Headcount;
PHM = Prevalence-Headcount Metric;
j = District
q = Number of children with nutritional deficit within the eligible sample
n = Eligible sample;
N = Eligible population
norm = Normalized;
max = District with the maximum value;
min = District with the minimum value

STEP 1: Calculating Prevalence

Formula: $P_j = (q_j / n_j) \times 100$

Example: $q_j = 137$

$n_j = 435$

$P_j = (137/435) \times 100 = 32\%$

STEP 2: Calculating Headcount

Formula: $H_j = P_j \times N_j$

Example: $P_j = 32\%$;

$N_j = 137624$

$H_j = (32/100) \times 137624 = 44040$

STEP 3: Normalizing the Prevalence

Formula: $P_j^{norm} = (P_j - P_{(min)}) / (P_{(max)} - P_{(min)})$

Example: $P_j = 32\%$

$P_{(max)} = 65\%$

$P_{(min)} = 13\%$

$P_j^{norm} = (32 - 13) / (65 - 13) = 0.365$

STEP 4: Normalizing the Headcount

Formula: $H_j^{norm} = (H_j - H_{(min)}) / (H_{(max)} - H_{(min)})$

Example: $H_j = 44040$

$H_{(max)} = 372756$

$H_{(min)} = 275$

$H_j^{norm} = (44040 - 275) / (372756 - 275) = 0.117$

STEP 5: Calculating the PHM

Formula: $PHM_j = (P_j^{norm} + H_j^{norm}) / 2$

Example: $P_j^{norm} = 0.365$

$H_j^{norm} = 0.117$

$PHM_j = (0.365 + 0.117) / 2 = 0.24$

REPORT AND DASHBOARD: FEATURES

- Each indicator in the report is visualised across a two-page spread and shows the following:
 - geographic variation in the **PHM** across districts in India with a colour gradient going from darker blue (lowest burden) to darker red (highest burden)
 - the number of districts in each state that fall in the lowest to highest burden decile categories of **PHM**
 - visual showing the total headcount burden along with the share attributable to the 100 indicator-specific priority districts
 - list of the 100 indicator-specific priority districts (ordered from highest to lowest) with any overlaps with the ADs
 - prevalence and headcount burden for each of the ADs
- The interactive and dynamic dashboard of 31 indicators of nutritional status of children across 640 districts [<https://geographicinsights.iq.harvard.edu/IndiaNutritionDistrict>] has the following features:
 - geo-visualises all of the India district variation and provides a tabular view of ranking of districts on a given indicator
 - allows users to focus on a single district or multiple districts (including the ability to just select the ADs) on a given indicator
 - dynamically provides the prevalence and headcount burden on a given indicator based on what's selected
 - allows users to compare multiple indicators and multiple districts simultaneously

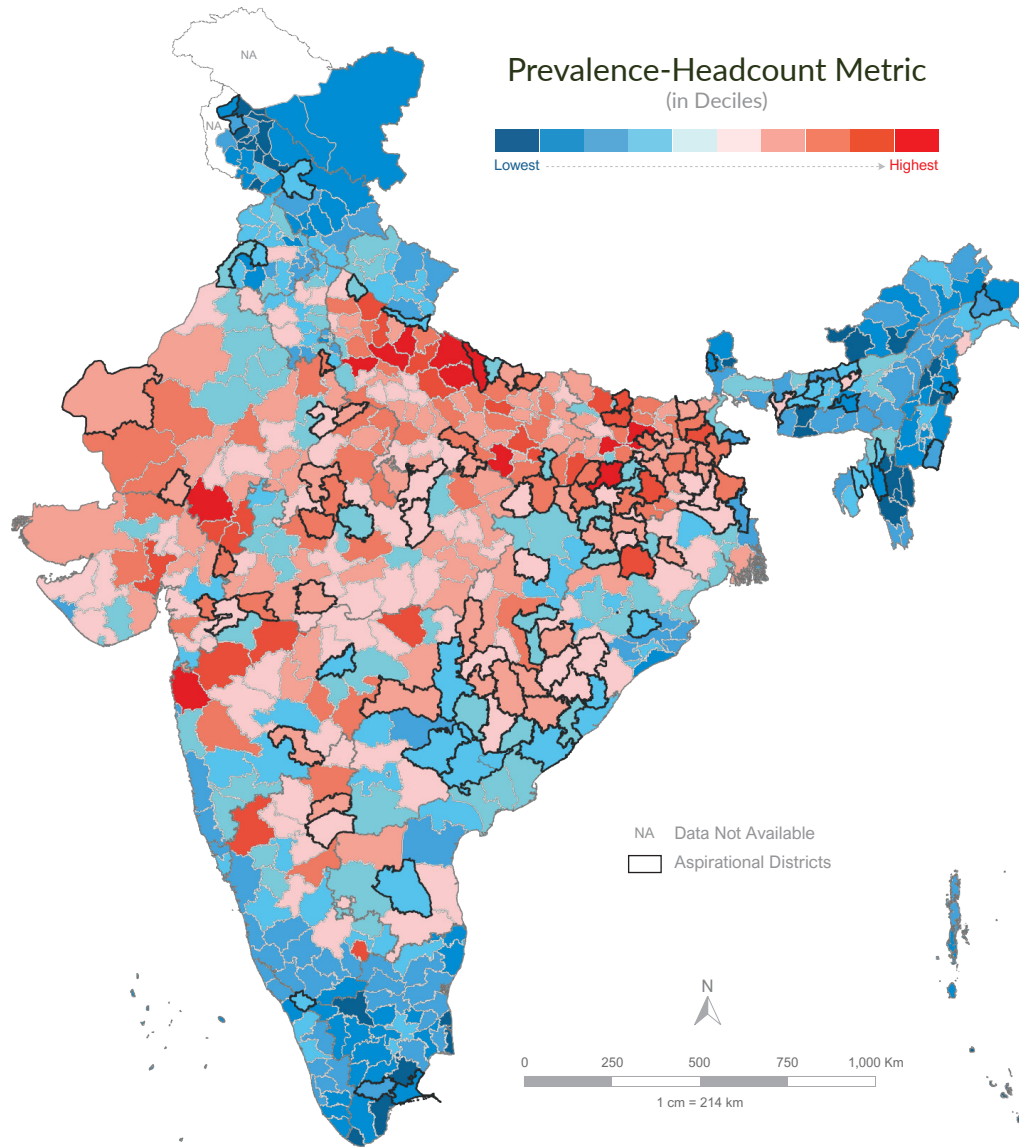
TYPES OF NUTRITIONAL DEFICIT

DIET AND ANTHROPOMETRIC FAILURE

DIET FAILURE ONLY

ANTHROPOMETRIC FAILURE ONLY

DIET AND ANTHROPOMETRIC FAILURE

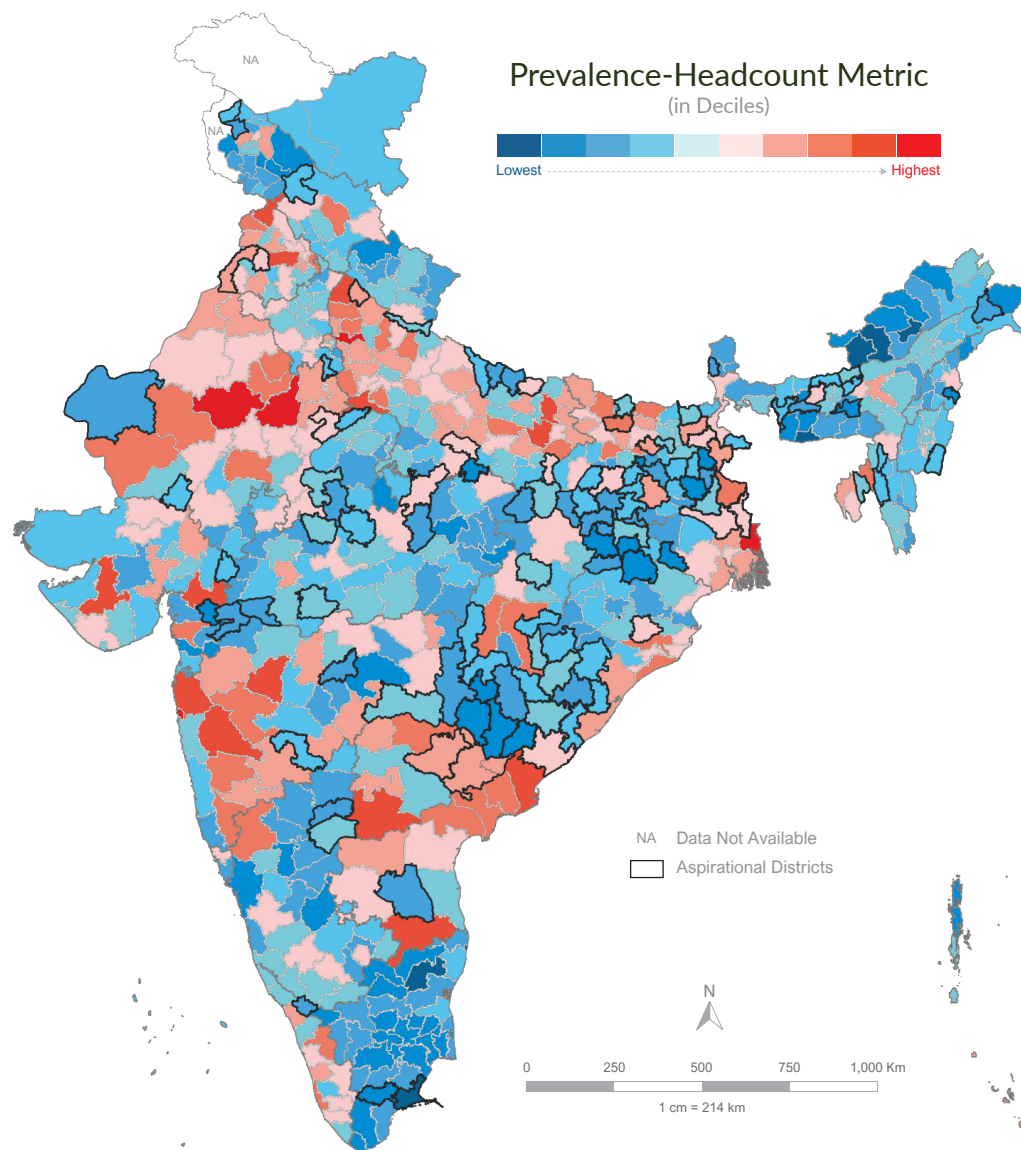


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles									Headcount	
Uttar Pradesh					1	5	9	16	15	25	2,774,822
Bihar					1	4	1	6	14	12	1,614,735
Maharashtra	1	3	3	6	5	6	4	2	5	1,088,167	
Madhya Pradesh			1	4	11	9	9	13	3	1,085,822	
Rajasthan					4	5	4	6	7	7	995,097
Gujarat			1	2	1	1	9	6	4	2	708,251
West Bengal	2	3	2	5	2	2	1			2	605,786
Karnataka	3	7	3	3	4	5	1	1	3	594,437	
Jharkhand					2	4	4	6	4	4	542,379
Odisha	1	5	5	6	6	3	3	1		429,298	
Andhra Pradesh			1	2	4	5				1	356,184
Chhattisgarh				2	4	2	4	4	1	1	331,229
Tamil Nadu	11	11	7	2	1						310,380
Assam			2	9	9	4	2	1			302,019
Haryana				3	2	8	3	4		1	289,686
Telangana			1	1	4	1		2	1		242,614
Punjab			5	2	7	4	1	1			209,357
Kerala			2	5	4	2	1				166,597
NCT of Delhi			1	1	5		1	1			110,997
Uttarakhand				3	6	2	2				95,982
Jammu & Kashmir	14	6	1	1							73,011
Himachal Pradesh	3	4	2	3							44,055
Meghalaya	2	3	2								29,800
Tripura			1			2	1				28,455
Manipur	3	4	1	1							16,421
Arunachal Pradesh	6	5	2	2				1			10,691
Nagaland	8	3									9,481
Goa			1			1					8,904
Chandigarh						1					7,948
Dadra & Nagar Haveli									1		6,307
Mizoram	6	1	1								5,771
Puducherry	4										4,716
Sikkim	2	2									2,239
Andaman & Nicobar Islands	2			1							1,648
Daman & Diu		1							1		1,340
Lakshadweep					1						402

*Colours correspond to the colour legend of the map and the values display the number of districts

DIET FAILURE ONLY



Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles										Headcount
Uttar Pradesh	2	1	4	2	4	6	13	8	15	16	1,941,124
Bihar	1	1	4	3	7	4	4	4	6	4	983,122
Maharashtra	1	3	7	2	2		4	2	6	8	914,465
Rajasthan		2	1	2	2	3	3	6	7	7	814,425
Madhya Pradesh	2	10	7	12	4	6	3	5		1	656,988
West Bengal			2		2	1	1	6	5	2	613,516
Gujarat	3	1	3	2	6	3		3	2	3	517,471
Karnataka	3	5	5	2	3	6	2	3		1	418,347
Andhra Pradesh			1	1	1			2	3	5	408,629
Odisha	1	3	4	5	3	4	4	3	1	2	389,908
Punjab				1		2	3	5	4	5	316,214
Assam	1	3		6	3	4	7	2	1		309,202
Telangana							1	2		3 4	307,356
Tamil Nadu	18	8	4	1	1						285,847
Kerala		1		1		3	2	3	2	2	278,113
Haryana		1	1	2	4	4	5	3	1		259,569
Jharkhand	6	5	4	4	3		1			1	258,468
Chhattisgarh	3	2	1	3	2	3		2		2	256,065
Nct Of Delhi		1	1	1		1	3	1	1		142,919
Jammu & Kashmir	4	5	2	4	2		3			2	139,103
Uttarakhand	1	3	2	1		3	1	1	1		98,394
Himachal Pradesh				3	3	3		2		1	69,276
Tripura							1	1	1	1	47,517
Manipur				1	1	3	1	2	1		33,835
Meghalaya	4	1	2								29,531
Nagaland	1	3		1	3	1		1			21,131
Mizoram			2	1	3	2					16,626
Chandigarh										1	12,767
Goa				1				1			12,759
Arunachal Pradesh	8	2	2	1	2	1					11,871
Puducherry	4										6,248
Sikkim		2	2								3,984
Andaman & Nicobar Islands	1						1		1		3,627
Dadra & Nagar Haveli		1									3,100
Daman & Diu				2							2,016
Lakshadweep					1						678

*Colours correspond to the colour legend of the map and the values display the number of districts

DIET MEASURES

INADEQUATE DIET

INADEQUATE DIET DIVERSITY

NO SOLID/SEMI-SOLID FOOD

NO DAIRY

NO NUTS/LEGUMES

NO GRAINS/ROOTS/TUBERS

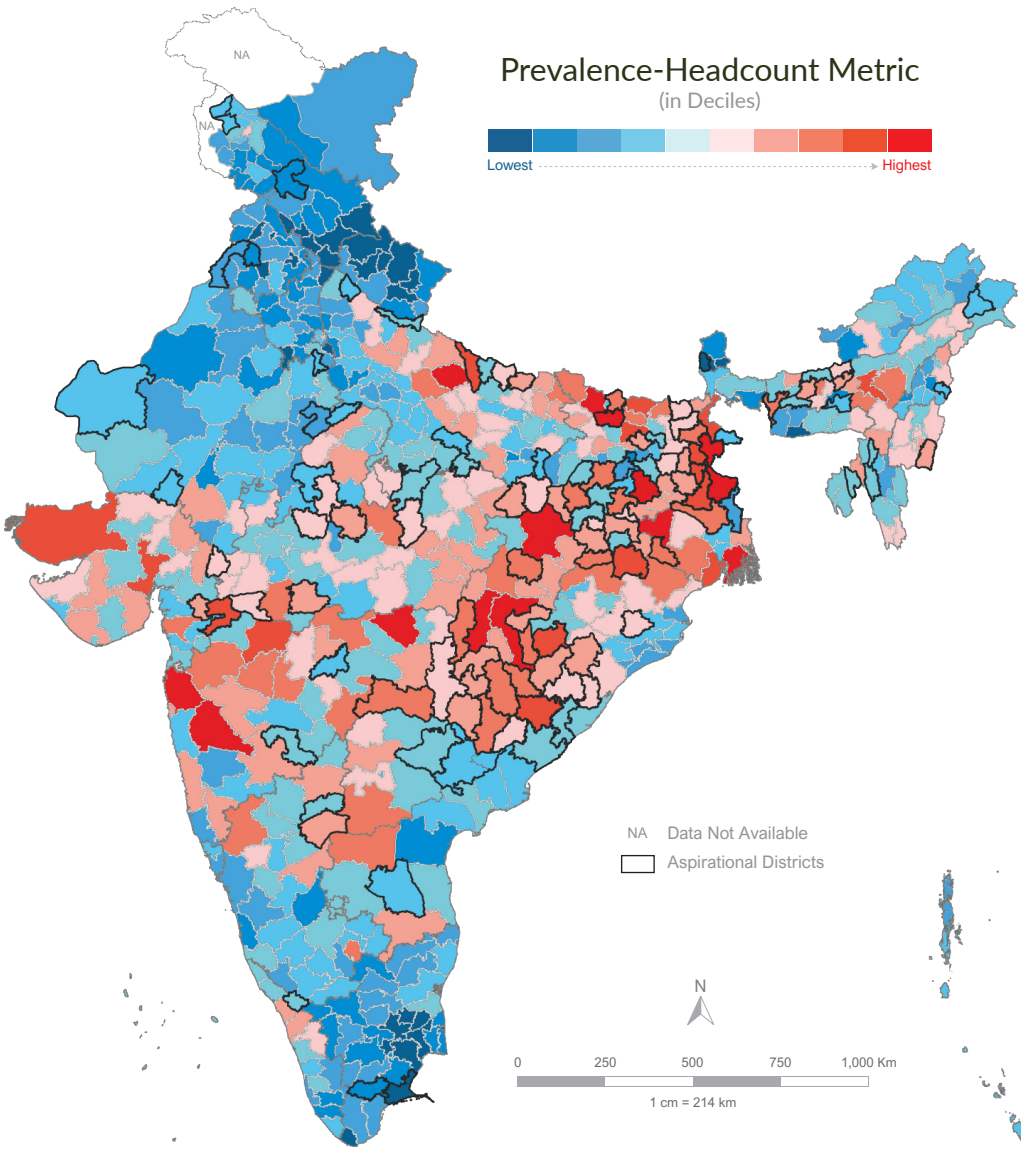
NO EGGS

NO FLESH FOODS

NO VIT-A RICH FRUITS/VEGETABLES

NO OTHER FRUITS/VEGETABLES

NO DAIRY

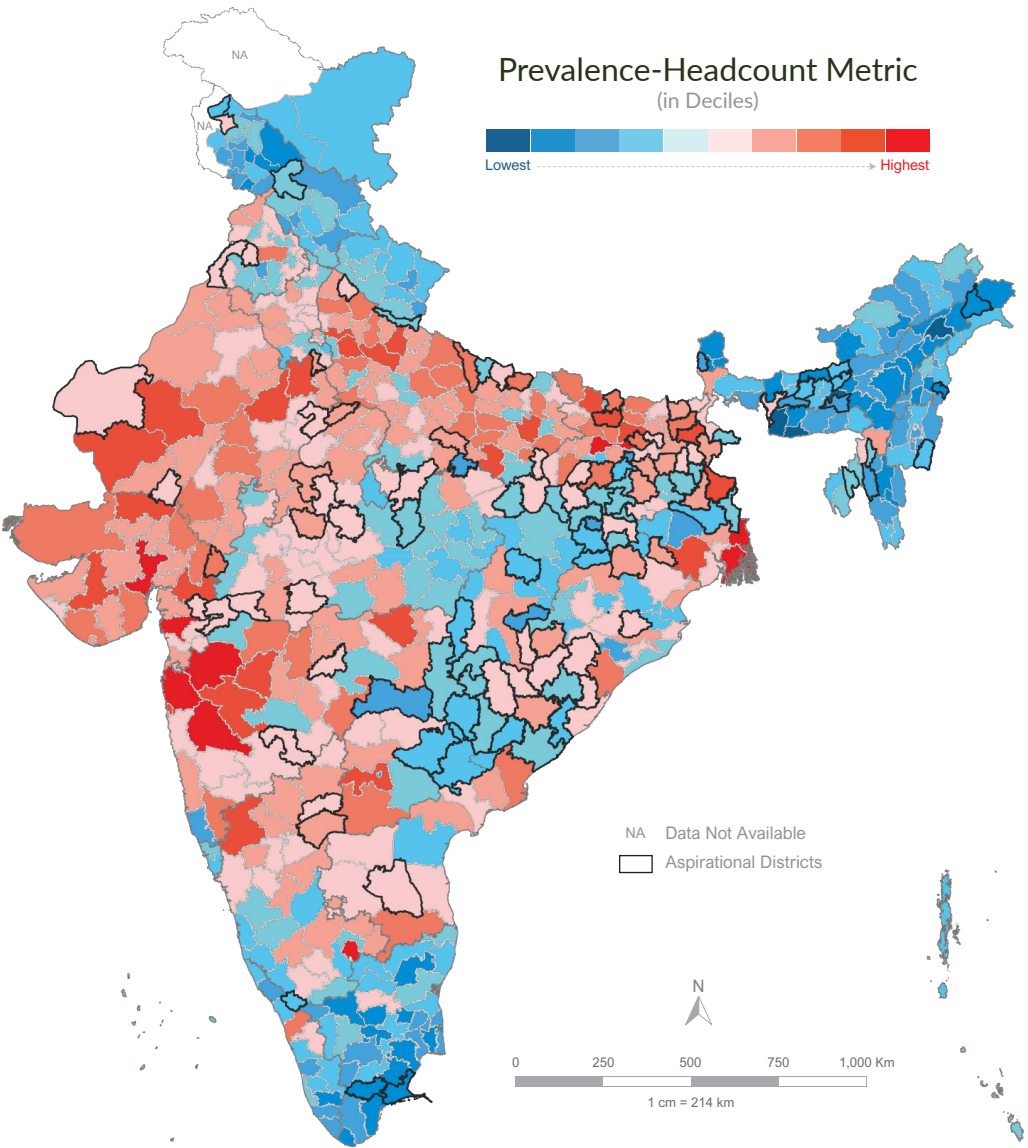


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles										Headcount
Uttar Pradesh	3	4	7	11	9	8	4	13	8	4	2,546,887
Bihar	2	3	3			6	4	8	4	8	1,751,668
Maharashtra	2	1	1	3	4	4	4	6	10		1,534,923
Madhya Pradesh		1	1	6	8	15	9	8	2		1,302,896
West Bengal	1	1	2	2	1	2		1	9		1,091,081
Gujarat		1	3	1	6	5	2	5	3		891,881
Rajasthan	1	4	9	8	9		1		1		813,156
Karnataka	1	3	4	6	6	2	2	4		2	736,247
Jharkhand					1	2	1	2	11	7	730,476
Odisha	1	4	2	2	1	6	6	3	5		666,886
Assam	1			3	7	5	3	5	3		584,194
Chhattisgarh						1		1	8	8	560,049
Tamil Nadu	13	9	7		2	1					500,228
Andhra Pradesh	1			2	4	3	1	1		1	478,408
Telangana				2	1	1	2	1	1	2	414,163
Kerala		3	1	2	2	2	2		2		362,628
Haryana	6	8	4	1	2						257,313
Punjab	8	7	4	1							213,768
Jammu & Kashmir	4	6	4	3	2	2	1				196,310
NCT of Delhi			1	6	2						172,505
Uttarakhand	8	3		1	1						97,213
Meghalaya	1	1	1	1		1	1	1			70,418
Tripura						2	1		1		61,161
Manipur					1		1	4	3		54,469
Himachal Pradesh	10	1	1								50,058
Nagaland	2			1	1	1			2		31,462
Arunachal Pradesh	2	3	3	4	1	2	1				25,210
Mizoram		1	2	1	1	1	2				24,492
Goa	1	1									13,916
Puducherry	2	2									9,687
Dadra & Nagar Haveli									1		7,663
Chandigarh	1										5,961
Andaman & Nicobar Islands		1	1	1							4,443
Sikkim	4										3,372
Daman & Diu	1						1				2,432
Lakshadweep									1		1,080

*Colours correspond to the colour legend of the map and the values display the number of districts

NO NUTS/LEGUMES

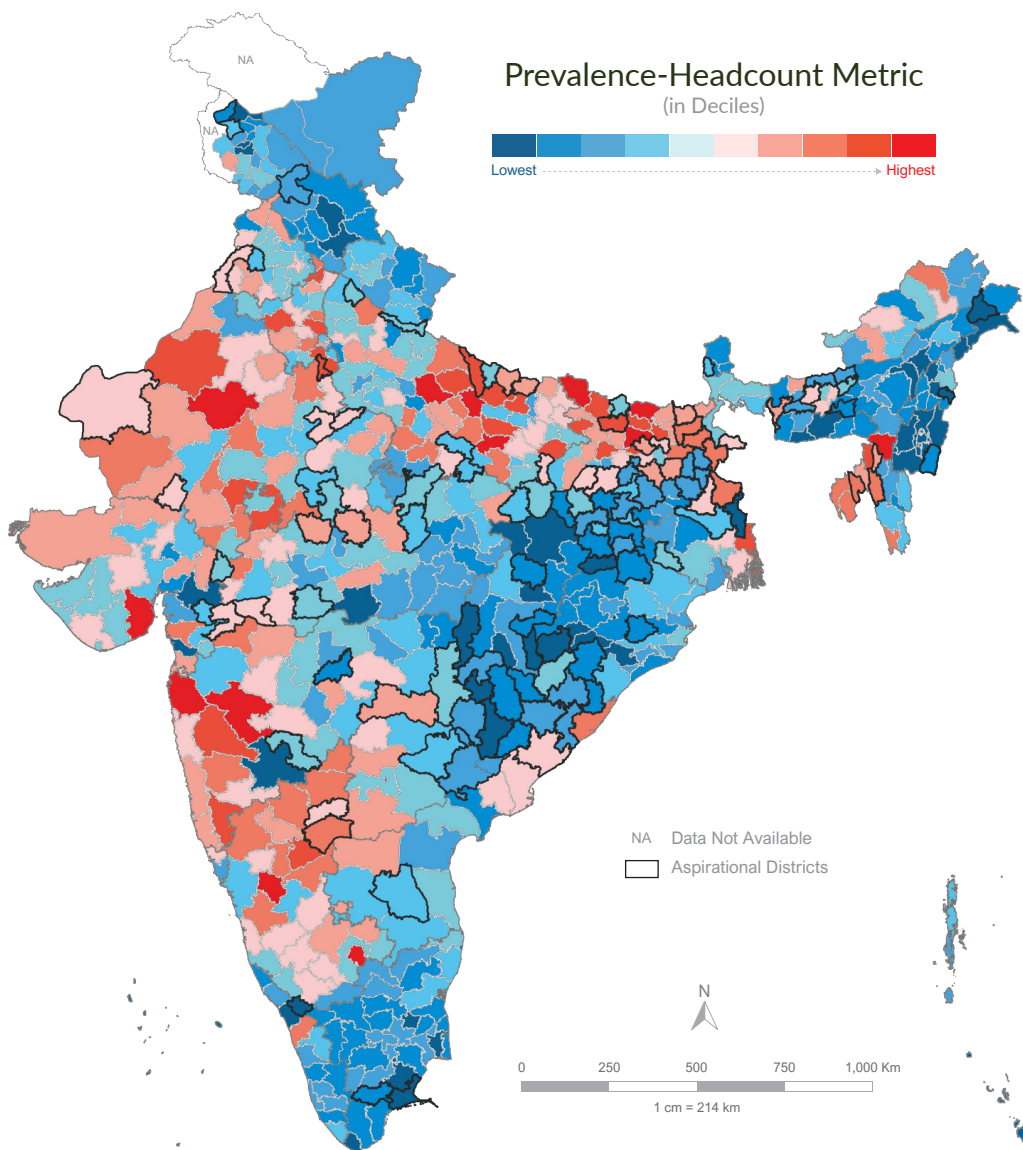


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles										Headcount
Uttar Pradesh	1	1	4	8	5	6	11	17	18		5,069,199
Bihar	1	2		2	4	4	6	8	11		3,055,414
Maharashtra	1		2	5	4	4	5	5	9		2,617,616
Rajasthan					2	7	9	8	7		2,027,818
Madhya Pradesh		4	6	11	8	11	8	2			2,004,043
West Bengal	1	1	3	1	1	3	2	1	2	4	1,685,552
Gujarat					2	4	5	6	9		1,617,832
Karnataka		1	3	3	2	4	5	5	5	2	1,410,070
Tamil Nadu	14	7	5	5		1					1,127,388
Odisha	1	4	4	3	6	6	5		1		1,019,347
Andhra Pradesh	1	1		1	3	3	1	1	2		930,449
Jharkhand	1	2	7	5	5	1	1	2			900,042
Haryana	2		1	7	4	2	4	1			668,678
Telangana	2	2	1	1	1			2	1		666,896
Assam	14	3	5	1	2	1			1		648,714
Punjab	1		2	5	4	5	1	2			617,241
Chhattisgarh	2	6	5	1	2		1	1			615,961
Kerala	2	5	3	1	1	1			1		574,718
NCT of Delhi	1	2		1	3	1	1				357,682
Jammu & Kashmir	7	4	5	5		1					339,831
Uttarakhand		5	2	4	1		1				233,193
Himachal Pradesh	1	4	3	2	2						138,786
Meghalaya	4	2	1								85,039
Tripura			1	1	2						81,460
Manipur	2	6	1								59,795
Nagaland	4	4		1	1						44,011
Arunachal Pradesh	6	3	2	5							33,290
Mizoram	3	3	2								30,183
Goa			1		1						28,278
Chandigarh								1			24,391
Puducherry	1	3									21,865
Dadra & Nagar Haveli								1			10,763
Sikkim	3	1									8,713
Andaman & Nicobar Islands			2	1							7,603
Daman & Diu				1	1						5,320
Lakshadweep				1							1,519

*Colours correspond to the colour legend of the map and the values display the number of districts

NO GRAINS/ROOTS/TUBERS

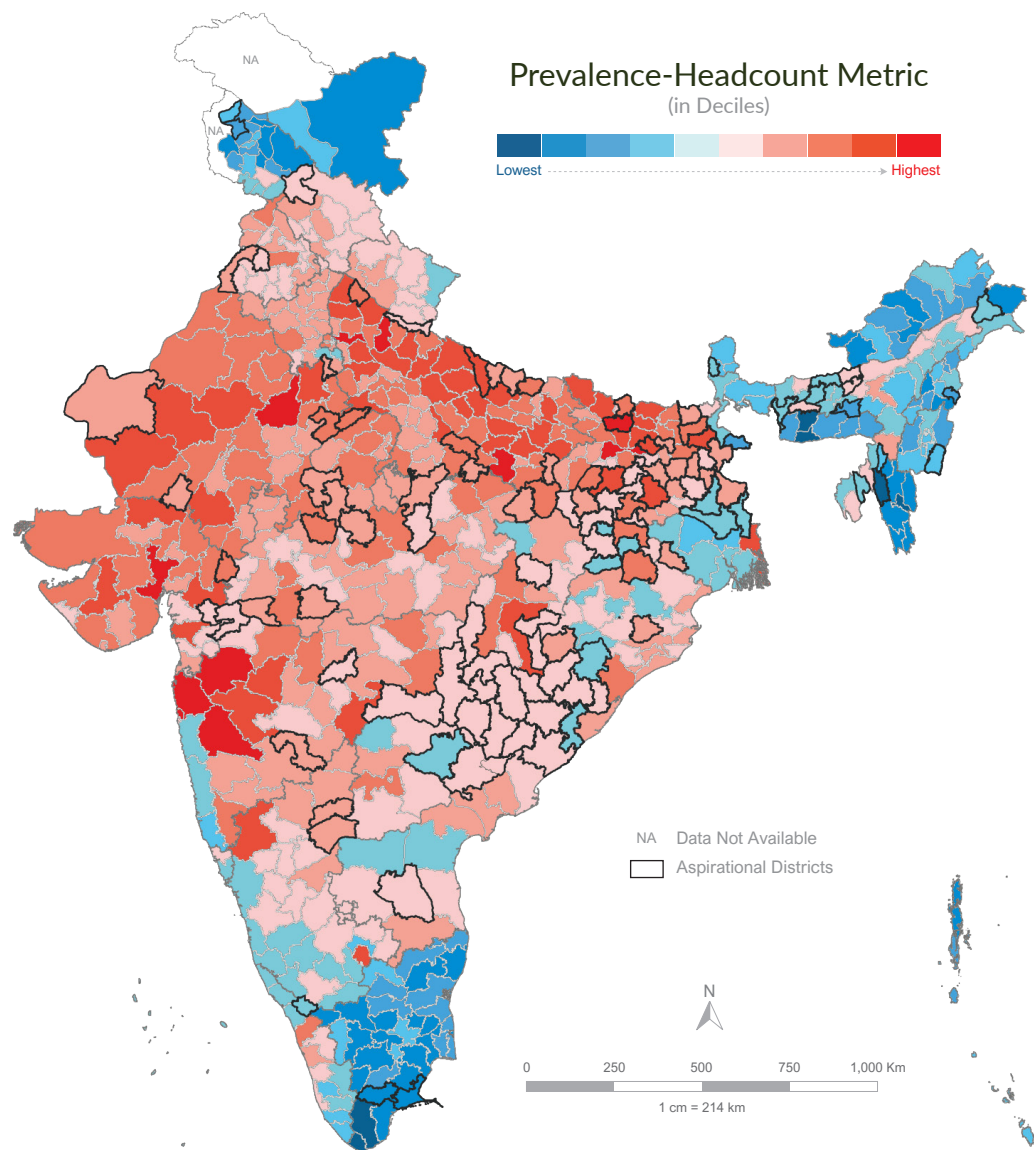


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles	Headcount
Uttar Pradesh	2 4 3 7 10 16 6 9 14	1,811,153
Bihar	3 2 3 5 12 10	1,247,704
Maharashtra	2 4 1 4 3 6 6 5 4	870,544
Rajasthan	1 4 3 4 7 6 8	776,037
Madhya Pradesh	1 2 4 7 4 12 5 7 7 1	706,717
Karnataka	1 1 3 6 6 4 9	610,193
West Bengal	1 1 2 3 3 2 4 1 2	527,064
Gujarat	2 1 1 1 4 5 2 4 4 2	482,511
Haryana	3 3 3 2 2 8	324,461
Andhra Pradesh	1 2 1 4 1 2 2	297,493
Tamil Nadu	9 7 9 4 2 1	297,050
Assam	3 6 4 4 1 2 1 1 3 2	261,574
Odisha	6 9 4 6 3 1 1	237,107
Telangana	2 2 1 1 2 2	234,094
Punjab	1 4 2 4 6 3	233,305
Jharkhand	1 6 5 7 2 1 2	223,947
Kerala	2 2 4 3 2 1	173,226
Chhattisgarh	7 5 3 2 1	124,783
Jammu & Kashmir	4 3 4 4 3 1 2 1	110,693
NCT of Delhi	1 1 3 3 1	110,214
Uttarakhand	2 1 4 3 3	79,452
Tripura	1 1 1 2	48,436
Himachal Pradesh	3 5 3 1	34,147
Meghalaya	3 3 1	23,774
Mizoram	1 2 2 1 1 1	15,503
Nagaland	4 2 1	13,141
Arunachal Pradesh	4 1 3 2 1 1 3 1	12,246
Goa	1 1	10,785
Manipur	8 1	9,825
Chandigarh	1	9,190
Puducherry	1 3	5,926
Dadra & Nagar Haveli	1	4,854
Sikkim	2 1 1	3,175
Andaman & Nicobar Islands	1 1 1	2,552
Daman & Diu	1 1	2,090
Lakshadweep	1	208

*Colours correspond to the colour legend of the map and the values display the number of districts

NO EGGS

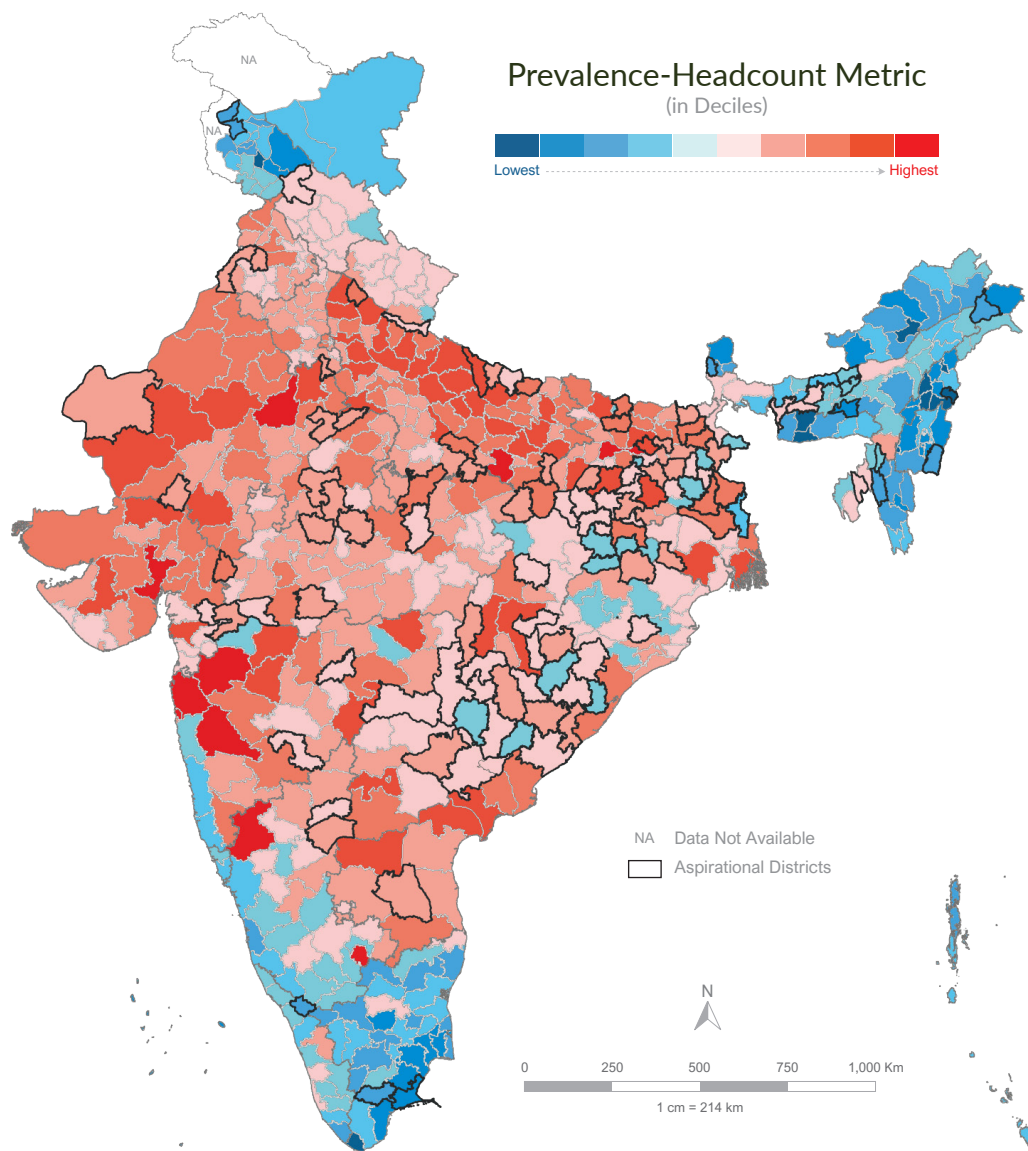


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles										Headcount	
Uttar Pradesh						3	7	17	17	27		5,428,941
Bihar			2	4		2	6	5	7	12		3,090,014
Maharashtra	1	2	2	5		6	6	2	3	8		2,540,780
Madhya Pradesh			2	8		11	12	9	8			2,116,357
Rajasthan							5	9	12	7		2,110,932
Gujarat				2	2		3	1	5	8	5	1,582,005
West Bengal		6	10						2		1	1,351,874
Karnataka		3	6	10		3	2	3	1		2	1,272,443
Odisha				4	11	4		6	4	1		992,559
Jharkhand				3	4	5		3	4	2	2	942,714
Andhra Pradesh					3		4	2	4			860,512
Assam						3	13	7	2		1	753,812
Tamil Nadu										27	5	730,008
Haryana					2			2	6	5	6	694,765
Chhattisgarh						1	7	2	5			684,723
Telangana							2	1	4			658,876
Punjab									3	6	4	628,443
Kerala									3	6	1	582,224
NCT of Delhi									1	1	2	368,417
Jammu & Kashmir										9	9	267,260
Uttarakhand												256,635
Himachal Pradesh												163,756
Tripura												79,707
Meghalaya												68,803
Manipur												54,876
Nagaland												37,465
Arunachal Pradesh												28,686
Goa												27,015
Chandigarh												23,373
Mizoram												17,679
Puducherry												14,113
Dadra & Nagar Haveli												10,645
Sikkim												9,267
Andaman & Nicobar Islands												5,302
Daman & Diu												4,571
Lakshadweep												1,355

*Colours correspond to the colour legend of the map and the values display the number of districts

NO FLESH FOODS



Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles	Headcount
Uttar Pradesh	2 2 10 14 17 26	5,465,914
Bihar	1 5 2 2 7 6 8 7	3,077,853
Maharashtra	2 2 3 2 4 7 3 4 8	2,669,573
Madhya Pradesh	7 4 17 7 10 5	2,145,426
Rajasthan	1 8 8 10 6	2,116,012
West Bengal	2 1 4 4 1 2 3 2	1,692,898
Gujarat	2 5 3 2 3 6 5	1,585,918
Karnataka	1 3 9 3 4 5 2 1 2	1,343,583
Tamil Nadu	15 13 2 2	1,068,416
Andhra Pradesh	1 2 4 3 3	1,027,101
Odisha	8 8 6 3 4 1	1,026,084
Jharkhand	7 7 1 4 2 2 1	935,846
Assam	1 7 12 4 2 1	765,975
Telangana	2 3 1 1 2 1	743,601
Chhattisgarh	2 4 5 2 1 1 3	715,721
Haryana	2 3 7 6 3	714,171
Punjab	1 6 5 2 4 2	654,155
Kerala	1 3 7 1 1 1	576,157
NCT of Delhi	1 1 2 1 1 3	392,401
Jammu & Kashmir	6 12 4	309,774
Uttarakhand	1 2 6 3 1	264,943
Himachal Pradesh	1 4 3 4	165,025
Tripura	1 2 1	85,926
Meghalaya	3 4	85,090
Manipur	7 2	46,734
Nagaland	10 1	31,639
Arunachal Pradesh	9 4 3	29,684
Mizoram	3 5	29,332
Goa	1 1	25,842
Chandigarh	1	24,838
Puducherry	3 1	20,190
Dadra & Nagar Haveli	1	10,763
Sikkim	3 1	8,339
Andaman & Nicobar Islands	1 2	6,377
Daman & Diu	1 1	4,802
Lakshadweep	1	1,035

*Colours correspond to the colour legend of the map and the values display the number of districts

ANTHROPOMETRIC AND CLINICAL MEASURES

STUNTING OR UNDERWEIGHT OR WASTING

STUNTING & UNDERWEIGHT & WASTING

STUNTING & UNDERWEIGHT

UNDERWEIGHT & WASTING

STUNTING

SEVERE STUNTING

UNDERWEIGHT

SEVERE UNDERWEIGHT

WASTING

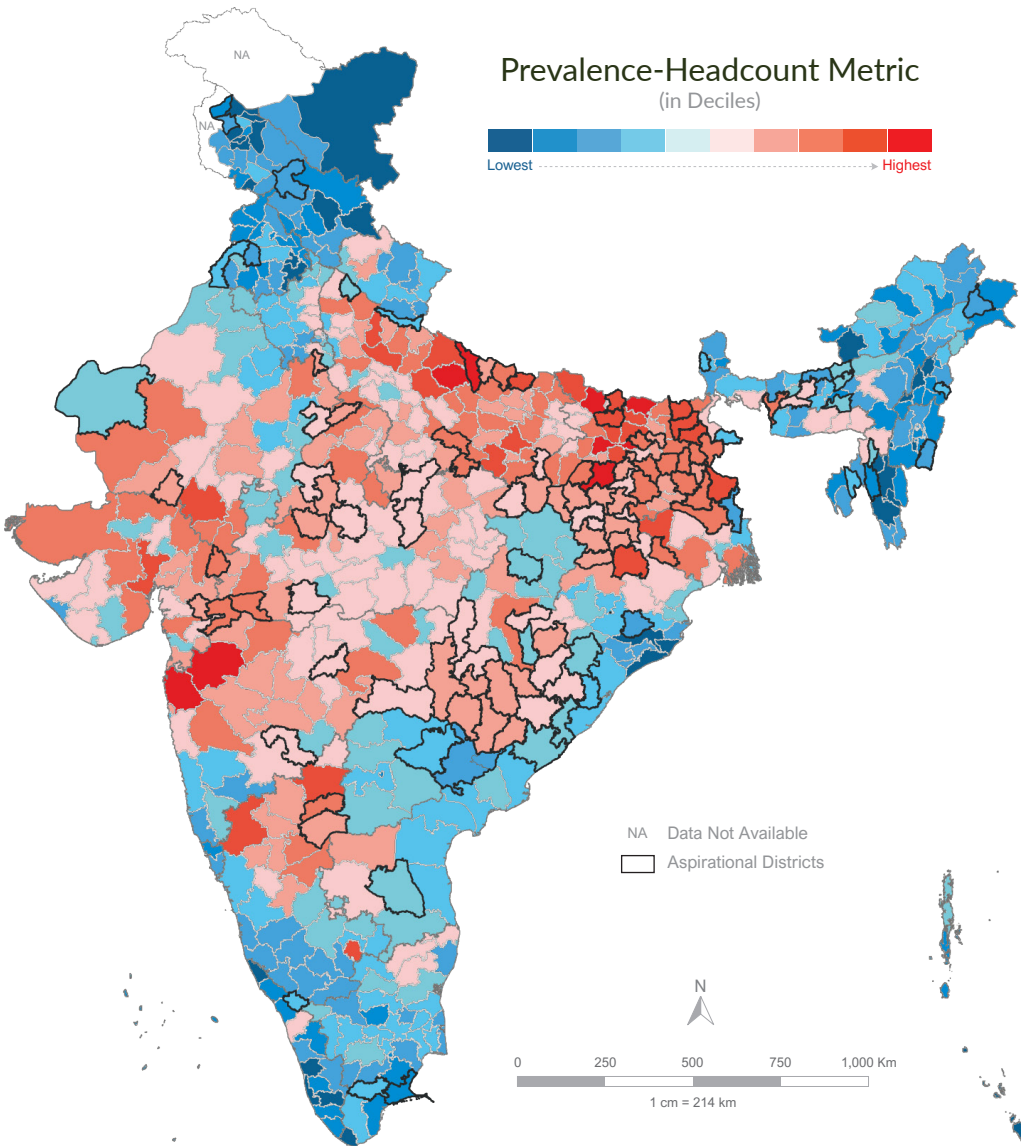
SEVERE WASTING

ANAEMIA

SEVERE ANAEMIA

LOW BIRTH WEIGHT

STUNTING OR UNDERWEIGHT OR WASTING

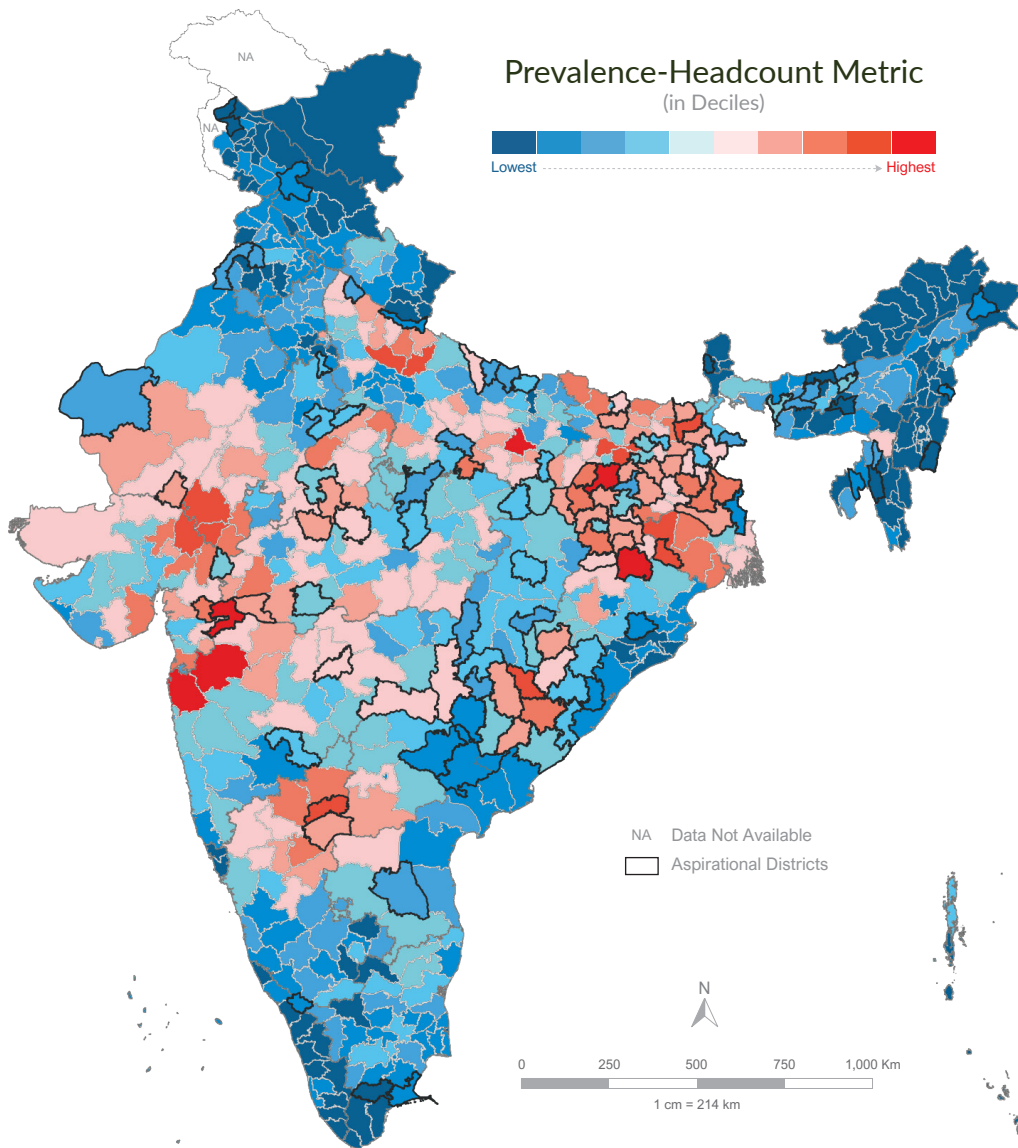


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles										Headcount	
Uttar Pradesh			2	1	10	10	13	14	21			12,700,000
Bihar						1	5	4	8	20		8,351,318
Maharashtra			3	2	4	3	8	8	3	4		5,359,599
Madhya Pradesh						5	10	16	12	5	2	4,788,550
Rajasthan			2	3	5	4	4	5	7	3		4,299,611
West Bengal		1	2	3	1	2	3		4	3		3,726,354
Gujarat			1		4	6	1	3	7	4		3,361,194
Karnataka			4	6	3	3	1	2	3	4	4	3,012,009
Jharkhand							3	2	7	9	3	2,508,153
Tamil Nadu		2	7	7	8	5	3					2,428,015
Odisha		3	2	3	6	5	3	5	3			1,936,614
Andhra Pradesh					7	4		1		1		1,731,013
Assam		1	5	6	4	4	5	1		1		1,690,078
Chhattisgarh				1	5	4	3	4	1			1,505,960
Haryana			2	3	5	6	3	1	1			1,300,629
Telangana		1		2	2	4	1					1,215,596
Kerala		7	5		1				1			904,925
Punjab		9	4	3	3	1						866,313
NCT of Delhi			2	3	1	2	1					655,506
Jammu & Kashmir			10	4	6	2						550,582
Uttarakhand			2	6	1	2	1			1		484,144
Meghalaya			1	1	1	1	2	1				239,888
Himachal Pradesh		3	8	1								224,543
Tripura		1	1	1	1							133,535
Manipur		5	4									96,279
Nagaland		7	1		1							76,263
Arunachal Pradesh		5	4	1	5	1						67,976
Goa			1	1								44,703
Puducherry		1	1	2								44,536
Mizoram		5	2	1								42,791
Chandigarh			1									33,817
Dadra & Nagar Haveli									1			24,168
Sikkim		1	1		2							19,616
Andaman & Nicobar Islands		2								1		12,244
Daman & Diu			1	1								9,028
Lakshadweep			1									2,035

*Colours correspond to the colour legend of the map and the values display the number of districts

STUNTING & UNDERWEIGHT & WASTING

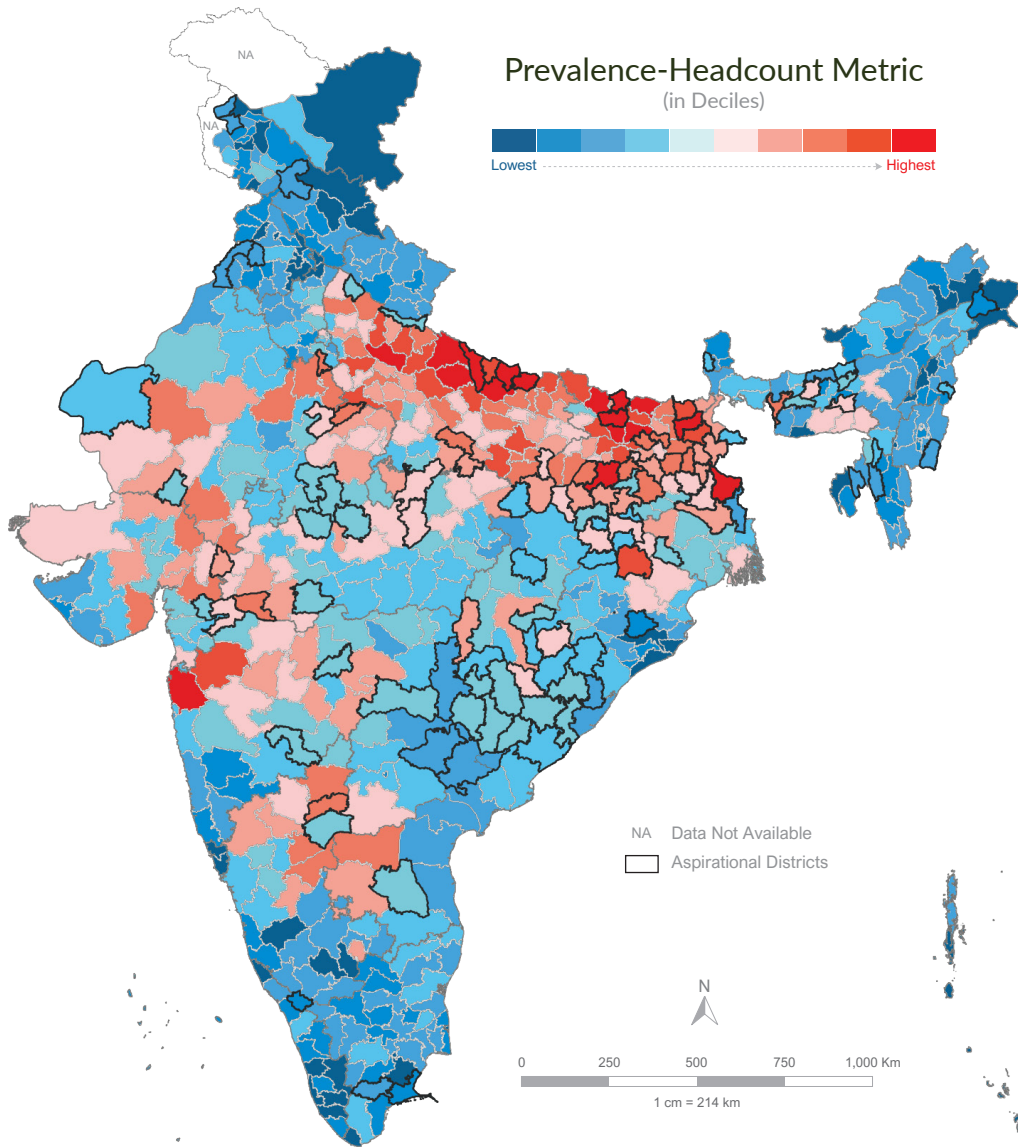


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles										Headcount
Uttar Pradesh	1	3	5	13	8	12	9	11	9		1,376,683
Bihar					1	3	5	3	16	10	1,083,065
Maharashtra		1	4	1	7	8	5	5	4		707,650
Madhya Pradesh			2	4	8	7	16	9	4		670,436
Rajasthan	1	1	4	4	4	2	7	6	4		545,138
West Bengal	1	1	1	2	1	2	3	1	7		505,952
Gujarat			1	1	3	6	4	3	8		454,351
Jharkhand					1	1	2	5	6	9	424,529
Karnataka	1	1	2	5	5	3	2	4	3	4	365,490
Odisha	1	3	4	5		4	6	2	1	4	247,056
Tamil Nadu	3	3	8	6	5	5	2				222,844
Andhra Pradesh		3	2	3	1	1	2	1			183,904
Telangana		2	1		1	3	2			1	170,122
Chhattisgarh			2	5	7	3			1		164,771
Assam	2	5	3	6	7	1	2	1			157,727
Haryana		3	4	6	6	2					107,248
Punjab	1	6	6	3	3	1					79,848
NCT of Delhi	1	1	3	1		1	1			1	71,528
Kerala	4	6	2	2							47,883
Uttarakhand	1	3	3	2	2	1			1		37,932
Jammu & Kashmir	8	10	4								27,402
Himachal Pradesh	2	5	4	1							17,233
Meghalaya		3	2	2							13,850
Tripura		1	2	1							11,374
Nagaland	7	2	1				1				5,222
Manipur	6	3									3,713
Arunachal Pradesh	11	3	1	1							3,450
Puducherry	2	1	1								3,412
Chandigarh			1								2,536
Dadra & Nagar Haveli									1		2,266
Goa		2									2,091
Mizoram	7			1							1,837
Andaman & Nicobar Islands	2								1		930
Sikkim	4										875
Daman & Diu	1								1		580
Lakshadweep				1							209

*Colours correspond to the colour legend of the map and the values display the number of districts

STUNTING

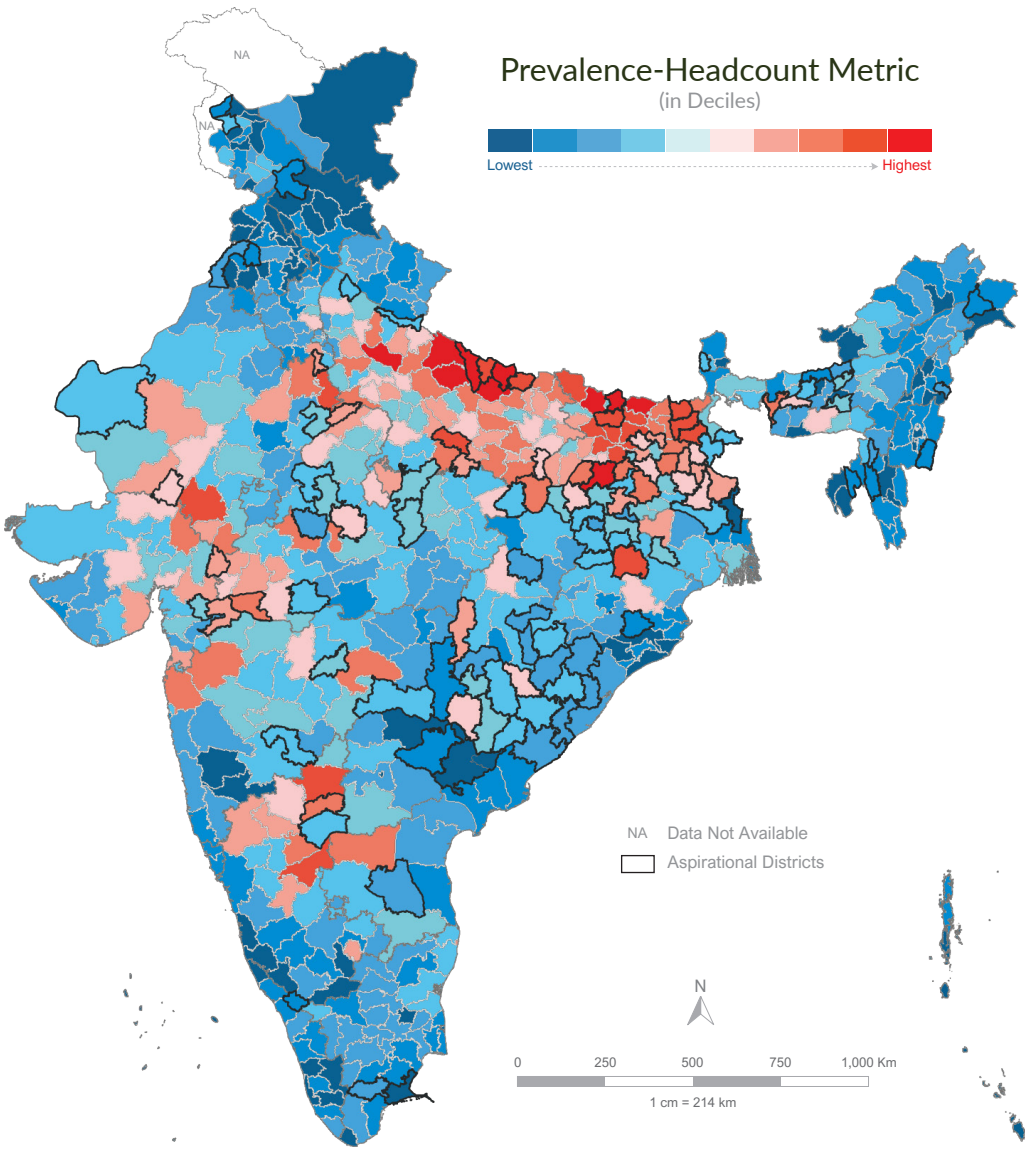


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles										Headcount	
Uttar Pradesh				1	1	3	4	16	20	26		9,746,259
Bihar								2	4	8	24	6,354,571
Maharashtra		3	3	2	5	7	4	6	3	2		3,302,840
Madhya Pradesh				2	12	3	15	11	7			3,251,875
Rajasthan				2	7	9	2	6	3	4		2,939,775
West Bengal				2	1	1	6	2	3	3	1	2,471,242
Gujarat	1			1	2	3	3	7	2	6	1	2,160,890
Karnataka	4	2	6	1	3	3	2	3	3	3		1,894,810
Jharkhand						1	4	7	4	5	3	1,713,953
Tamil Nadu		3	9	6	9	3	2					1,488,071
Odisha		3	4	1	4	5	5	5	3			1,294,058
Assam			3	3	6	7	2	4	1	1		1,204,731
Andhra Pradesh				2	3	3	3				2	1,150,420
Chhattisgarh				1	4	1	6	4			2	974,270
Haryana	2	5	2	4	3	1	3				1	825,615
Telangana	1		3	1	1	2	2					797,934
Punjab	6	6	5	2	1							563,990
Kerala	7	5	1			1						511,677
NCT of Delhi				2	1	3		2		1		467,018
Jammu & Kashmir	9	5	3	2	2	1						397,995
Uttarakhand	1	1	5	4			1	1				321,340
Meghalaya	1			2						4		179,783
Himachal Pradesh	5	4	3									146,786
Tripura	1	1	2									79,978
Manipur	1	2	2	4								78,378
Nagaland	3	4			2	1						57,011
Arunachal Pradesh	6	4	2	2	2							43,923
Mizoram	2	2	2	2								35,075
Chandigarh				1								24,517
Puducherry	1	1	2									23,090
Goa	2											20,505
Dadra & Nagar Haveli										1		15,860
Sikkim	2		1			1						13,374
Andaman & Nicobar Islands	2		1									7,002
Daman & Diu	1			1								4,481
Lakshadweep				1								1,409

*Colours correspond to the colour legend of the map and the values display the number of districts

SEVERE STUNTING

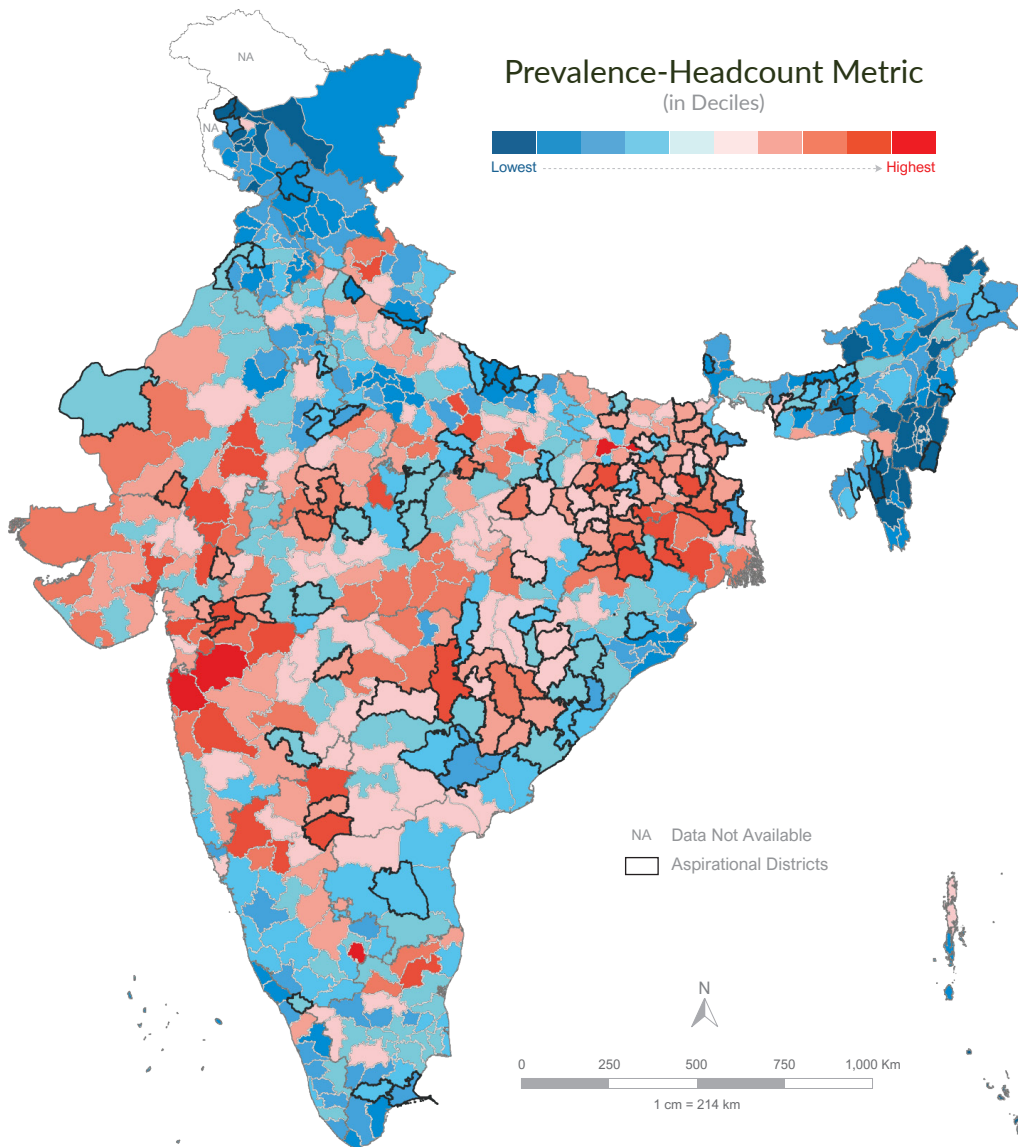


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles	Headcount
Uttar Pradesh	1 1 2 8 17 19 23	4,502,881
Bihar	1 5 9 23	3,032,964
Madhya Pradesh	1 5 4 11 8 9 9 3	1,438,074
Rajasthan	1 5 3 5 5 5 5 4	1,301,134
Maharashtra	2 2 2 4 6 5 6 4 1 3	1,218,323
Gujarat	1 3 2 2 7 6 4 1	929,900
Karnataka	4 4 2 2 2 4 2 1 5 4	868,337
West Bengal	2 3 3 3 4 2 2	793,650
Jharkhand	2 6 4 6 4 2	769,146
Tamil Nadu	3 5 4 6 10 3 1	598,904
Odisha	3 3 5 7 4 3 3 2	469,795
Assam	1 5 4 2 7 3 3 1 1	468,818
Chhattisgarh	2 2 3 3 3 3 2	399,968
Andhra Pradesh	3 1 4 2 1 1 1	381,411
Haryana	1 2 4 5 3 1 2 1 2	356,329
Telangana	2 1 1 1 2 1 1 1	260,779
Kerala	5 3 4 1 1	177,880
Punjab	9 4 5 1 1	177,570
Jammu & Kashmir	7 6 2 2 5	167,574
NCT of Delhi	1 3 4 1	146,782
Uttarakhand	2 3 2 3 2 1	133,739
Meghalaya	1 2 3 1	77,451
Himachal Pradesh	6 5 1	43,721
Tripura	2 2	26,098
Manipur	3 2 4	23,811
Nagaland	3 3 1 1	20,674
Arunachal Pradesh	4 5 1 3 1 2	17,905
Mizoram	2 2 4	11,582
Puducherry	2 1 1	10,861
Goa	2	9,326
Dadra & Nagar Haveli	1	7,552
Sikkim	2 2	6,010
Chandigarh	1	5,918
Andaman & Nicobar Islands	2 1	2,039
Daman & Diu	1 1	1,541
Lakshadweep	1	313

*Colours correspond to the colour legend of the map and the values display the number of districts

WASTING

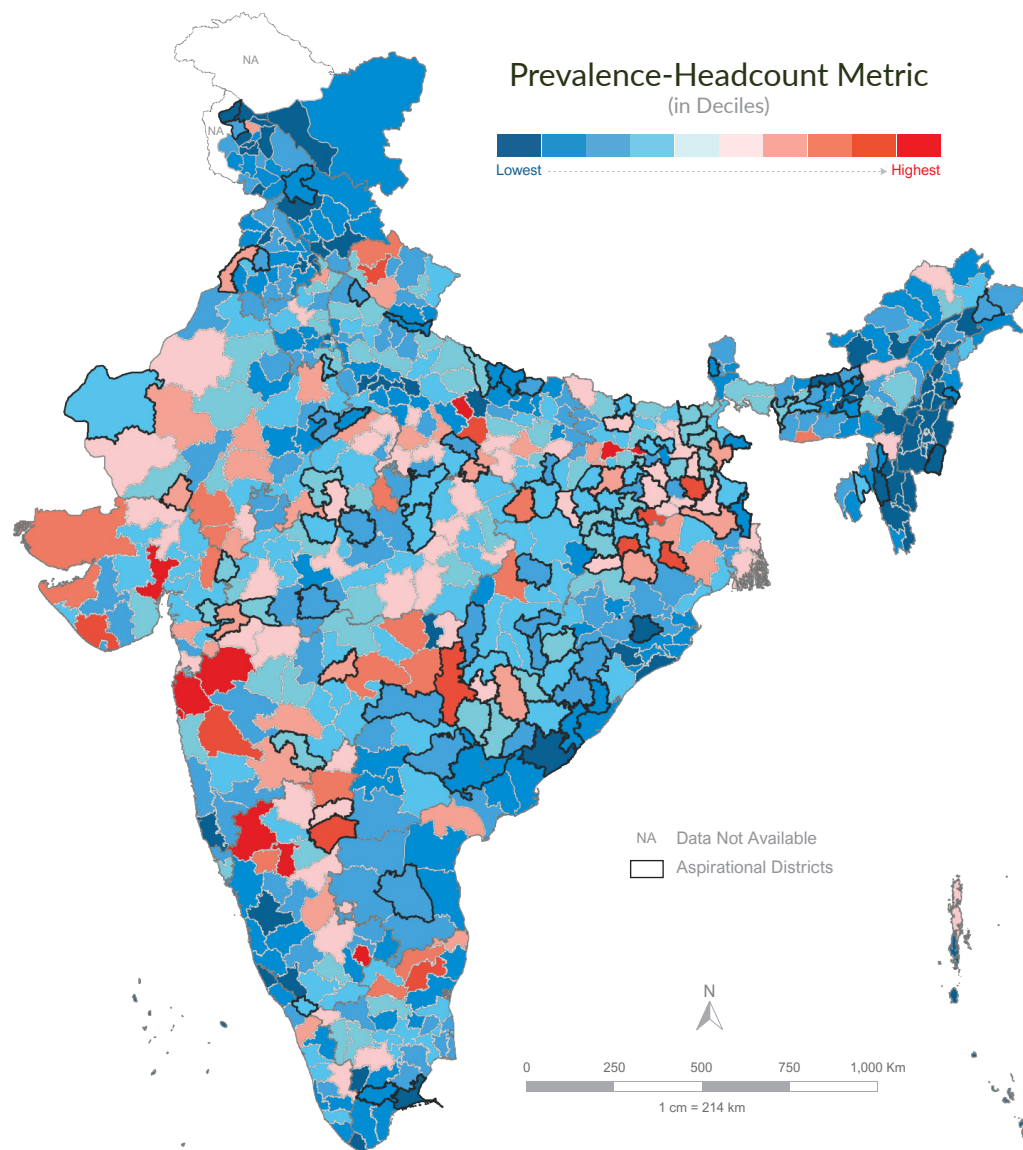


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles										Headcount
Uttar Pradesh	2	10	8	5	9	7	10	8	8	4	3,811,699
Bihar	1		3	3	4	6	8	10	3		2,750,181
Maharashtra		1	2	1	4	7	4	6	10		2,475,054
Madhya Pradesh			1	8	9	6	10	8	8		1,986,994
Rajasthan	1	4	1	3	4	3	5	4	8		1,732,508
West Bengal	1	2	2	1	2	2		3	6		1,537,531
Gujarat					1	4		7	8	6	1,491,814
Karnataka	2	1	8	2	3	3	1	4	6		1,358,801
Jharkhand			1		2	4	6	5	6		1,101,275
Tamil Nadu	1	2	7	4	8	2	2	2	2	2	1,080,954
Odisha	1	3	4	3	8	3	2	3	2	1	777,100
Andhra Pradesh				5	3	2	3				648,531
Chhattisgarh				5		2	4	5	1	1	606,749
Assam	5	6	3	7	2	2	1		1		569,585
Haryana		1	3	3	4	4	3	2		1	526,523
Telangana			1	2	1	2	3	1			508,260
Kerala	1	3	5	1	2	1			1		402,097
Punjab	3	6	5	3	2	1					343,861
NCT of Delhi	1	2		2	1	3					235,346
Uttarakhand	1	3	3	1		1	1	1		2	188,816
Jammu & Kashmir	12	6	3					1			166,159
Himachal Pradesh	3	6	2	1							79,564
Meghalaya	1	3	1						1		65,529
Tripura		1	1		2						58,109
Arunachal Pradesh	4	1	6	3	1			1			25,940
Puducherry	1	1			1	1					23,147
Goa			1					1			23,071
Nagaland	8	1	1	1							22,601
Manipur	9										18,663
Dadra & Nagar Haveli								1			10,573
Chandigarh	1										8,454
Mizoram	8										7,998
Sikkim	1	1	2								6,456
Andaman & Nicobar Islands	1	1							1		5,578
Daman & Diu		1					1				4,883
Lakshadweep	1										731

*Colours correspond to the colour legend of the map and the values display the number of districts

SEVERE WASTING

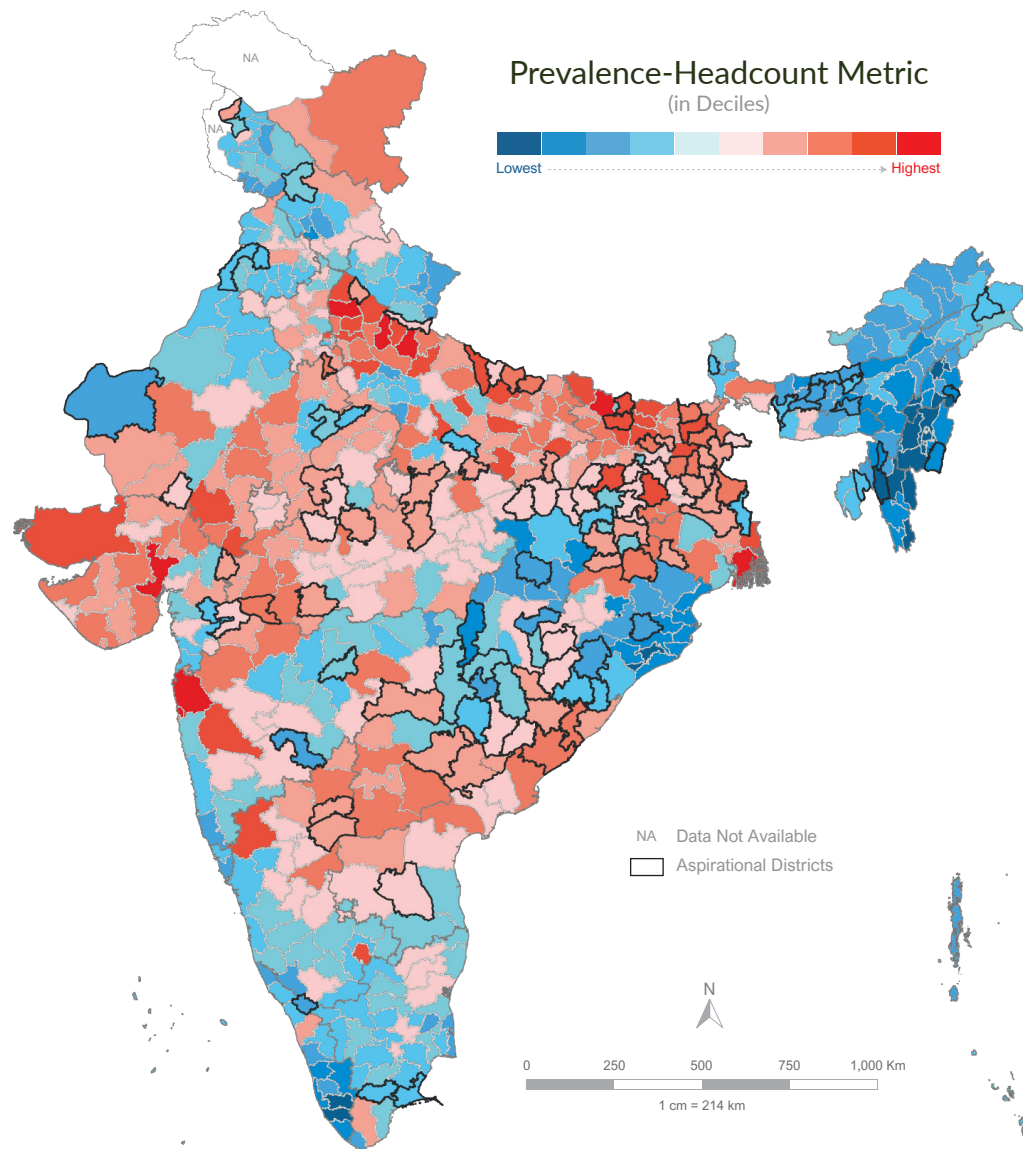


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles										Headcount	
Uttar Pradesh	3	8	10	7	7	10	3	9	7	7	1,303,226	
Bihar		1	1	1	3	7	6	10	6	3	924,531	
Maharashtra	2			3	2	5	3	5	4	11	917,435	
Madhya Pradesh			1	4	7	7	11	7	11	2	712,532	
Rajasthan			4	4	2	5	1	5	6	6	638,503	
Karnataka	2	4	3	1	4	1	2	1	5	7	554,709	
Gujarat					3		4	6	3	3	7	549,570
West Bengal		3			2	1	1	4	1	3	4	487,016
Jharkhand					1	1	2	6	3	7	4	435,216
Tamil Nadu	3	5	3	3	3	3	3	2	2	5	431,002	
Odisha	2	7	2	7	4	4	1	3			243,634	
Haryana		1	2	2	3	1	4	6	1	1	226,736	
Chhattisgarh		1	1	2	1	5	3	2	1	2	214,960	
Assam	6	3	5	4	3	1		3	2		205,596	
Andhra Pradesh	1	1	5		5					1	174,566	
Kerala		2	4	2		2	2		1	1	167,177	
Telangana		1	3	1	3	2					127,994	
Punjab	3	6	3	3	3		1		1		124,122	
Uttarakhand		1	2	3	1	1		2		3	88,901	
Jammu & Kashmir	9	3	4	2	3					1	73,608	
NCT of Delhi	2	1		1	1	2	2				70,930	
Meghalaya		2	1	1	2					1	29,811	
Himachal Pradesh	3	6	2	1							22,650	
Tripura		1	1	1				1			20,983	
Arunachal Pradesh	2	2	4		3			3	1	1	12,144	
Goa					1			1			9,727	
Nagaland	7	1	1		2						7,844	
Puducherry	1				2			1			7,485	
Manipur	8	1									5,850	
Dadra & Nagar Haveli								1			4,154	
Mizoram	6	1	1								2,955	
Sikkim			2		2						2,599	
Chandigarh	1										2,536	
Daman & Diu				1					1		2,403	
Andaman & Nicobar Islands	2									1	2,229	
Lakshadweep	1										157	

*Colours correspond to the colour legend of the map and the values display the number of districts

ANAEMIA

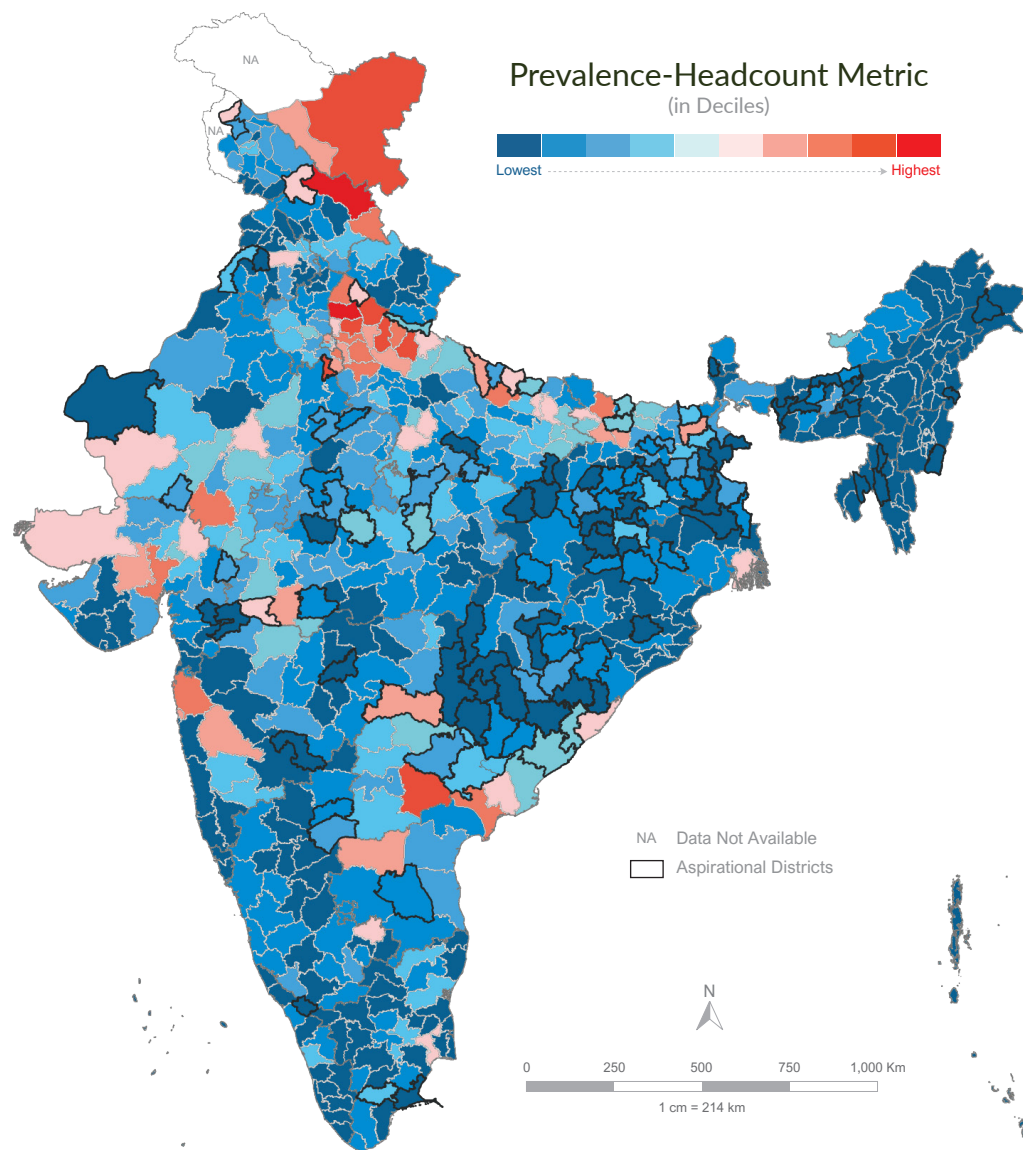


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles										Headcount	
Uttar Pradesh	2	4	5	1	3	10	12	11	23			12,100,000
Bihar					2	7	2	4	7	16		7,574,399
Madhya Pradesh						6	15	10	9	6	4	4,845,701
Maharashtra	3	1	10	7	4	2	2	2	4			4,731,980
Rajasthan	1	4	3	4			3	7	8	3		4,123,620
West Bengal		2				2	1	3	1	7	3	3,749,338
Gujarat		3	1	5	3	2	4	6	2			3,224,900
Karnataka	1	3	8	3	4	4	2	2	3			2,896,841
Tamil Nadu	3	9	5	10	3	2						2,527,755
Jharkhand	1				3	1	7	5	5	2		2,401,976
Andhra Pradesh						2	4	2	1	3	1	1,978,997
Haryana			1	3	4	6	5	1	1			1,580,525
Telangana					1		3	3	2	1		1,548,688
Odisha	10	6	2	1	2	3	3	2	1			1,532,060
Punjab		1	5	5	4	3		2				1,137,892
Assam	13	10	2	2								1,072,570
Chhattisgarh	3	7	3	1	2	2						996,422
Kerala	7	3	3						1			826,387
NCT of Delhi				4	1		2	1		1		790,850
Jammu & Kashmir		4	4	8	2		1	2	1			738,463
Uttarakhand		3	3	4		1	1		1			518,551
Himachal Pradesh	1	2	3		2	2	1		1			276,556
Meghalaya	2	1	2			2						182,581
Tripura		1	2	1								145,549
Arunachal Pradesh	1	7	5	2	1							72,667
Manipur	9											56,705
Chandigarh							1					55,392
Nagaland	10	1										49,008
Goa		1	1									45,841
Puducherry	1	3										39,640
Dadra & Nagar Haveli									1			28,934
Mizoram	7	1										23,882
Sikkim		1		3								22,314
Andaman & Nicobar Islands		2	1									13,581
Daman & Diu						1	1					13,413
Lakshadweep			1									2,497

*Colours correspond to the colour legend of the map and the values display the number of districts

SEVERE ANAEMIA

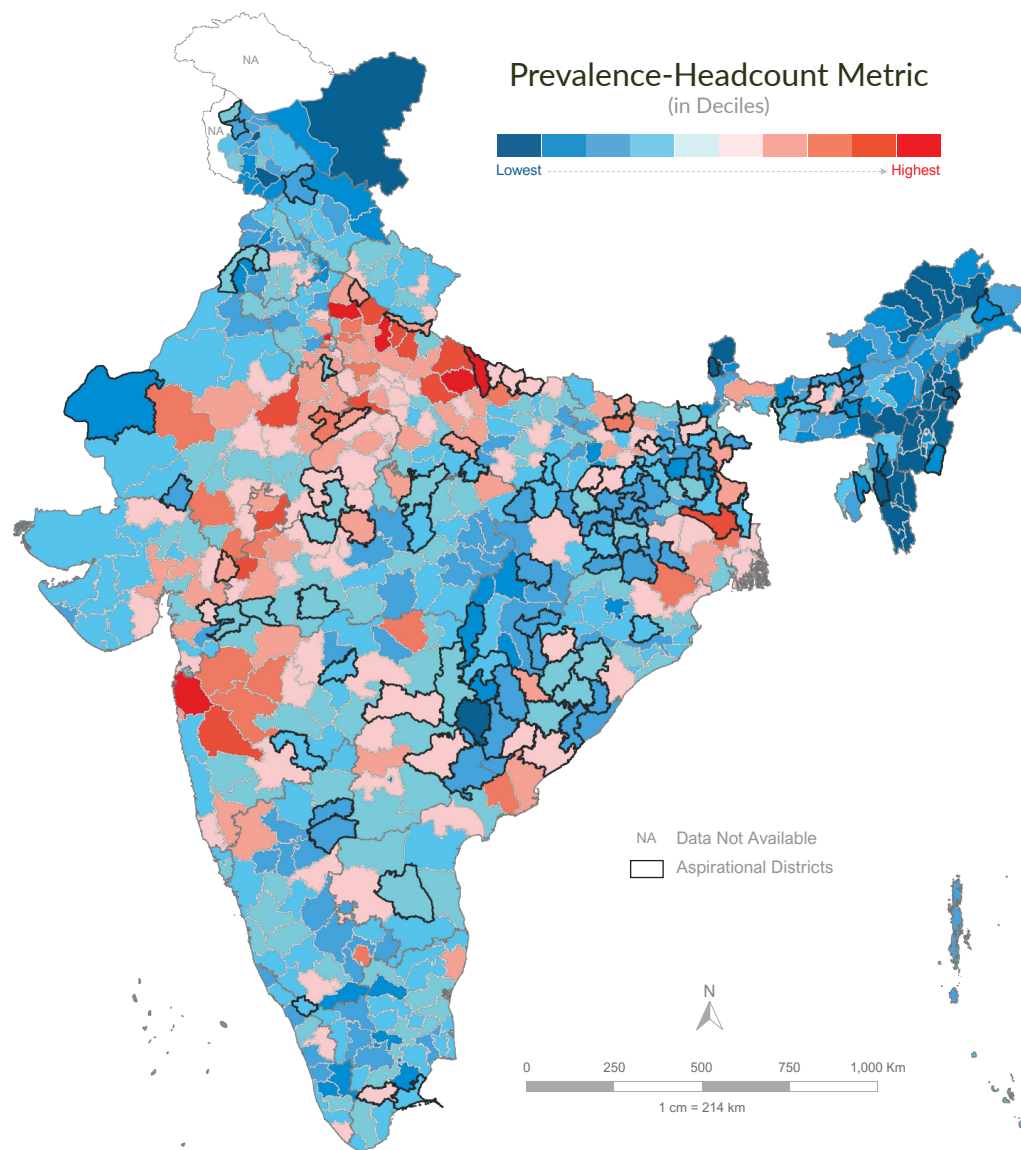


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles										Headcount	
Uttar Pradesh			2	3	6	7	9	9	13	22		451,677
Bihar	1	1	3	4	4	6	4	5	5	5		162,784
Madhya Pradesh			2	6	2	9	9	13	7	2		141,671
Rajasthan	1		1	1	3	4	8	2	10	3		127,616
Maharashtra	6		8	4	2	2	2	4	4	3		103,136
Gujarat	1	1	3	2	2	3	1	7	2	4		90,268
Andhra Pradesh						2	2	1	1	3	4	75,565
Haryana	2					1	5	5	3	2	3	67,337
Telangana								3		5	2	61,374
NCT of Delhi									3	1	5	53,679
Tamil Nadu	6	2	5	7	2	4	1		4	1		46,780
Karnataka	5	2	1	5	5	7	4				1	39,888
Jharkhand			4	5	6	2	3	4				39,754
West Bengal	7		1	2	3	2	1	2			1	35,709
Jammu & Kashmir	2		1	1	3	1	6	3	2	3		33,172
Punjab	3	3	2	3			1	3	2	2	1	29,999
Odisha	4	4	5	7	4	3	2	1				27,649
Uttarakhand	1	1		2	3	3				2	1	21,306
Chhattisgarh	3	2	5	2	4	1			1			15,678
Assam	8	4	7	5	2				1			14,029
Himachal Pradesh	1		3		2		1	2			3	13,263
Kerala	8	1		2	1	1			1			10,027
Chandigarh											1	3,154
Meghalaya	1	3	1	1	1							1,767
Arunachal Pradesh	4	6				3	1	1		1		1,497
Nagaland	3	4		1								786
Mizoram			3	5								766
Tripura	2	2										643
Dadra & Nagar Haveli									1			619
Goa			1		1							505
Manipur	2	7										393
Puducherry	1	3										227
Sikkim	1	1	1						1			205
Daman & Diu				1					1			180
Andaman & Nicobar Islands	1	2										128
Lakshadweep			1									19

*Colours correspond to the colour legend of the map and the values display the number of districts

LOW BIRTH WEIGHT



Distribution of Districts across States*

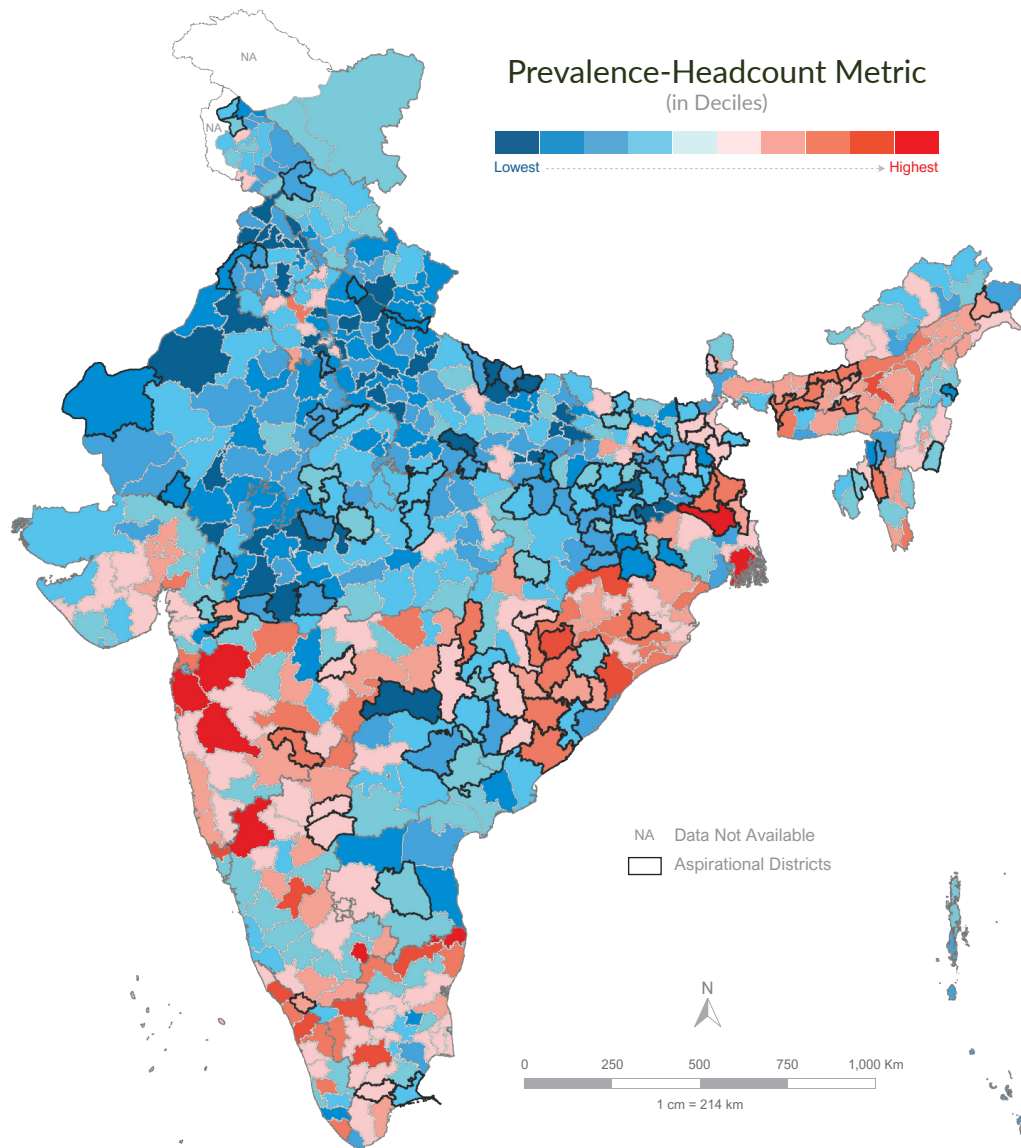
State	Prevalence-Headcount Metric Deciles										Headcount	
Uttar Pradesh	1	2	6	5	6	7	9	15	20		4,438,303	
Bihar	1	4	4	3	9	2	3	4	6	2	1,915,443	
Maharashtra	1	1	5			4	7	6	3	8	1,905,768	
Madhya Pradesh	2	2	9	1		6	5	7	11	7	1,682,329	
Rajasthan	1	2		5		3	2	6	5	9	1,600,580	
West Bengal	1	1		2		3	1	2	5	4	1,263,371	
Gujarat	1		4	5		2	2	3	6	3	1,071,062	
Tamil Nadu	3	3	3	10		6	5		1	1	901,505	
Karnataka	4	5	4	5		6	1	3		2	893,379	
Odisha	2	2	4	2		5	5	5	4	1	786,926	
Andhra Pradesh	1	1		2		2	2	2	1	2	655,307	
Jharkhand	3	12	4			3	2				550,147	
Assam	3	7	6	3	3	1	2	2			515,992	
Haryana	1	1	1	3	3	4	2	2	4		499,042	
Telangana	1		1			1	2	3	1	1	465,903	
Kerala		2	4	2	1		2		3		388,035	
Punjab	2	3	3	3		1	6	2			381,119	
NCT of Delhi				2	2				1	1	3	380,318
Chhattisgarh	3	5	5	1	3				1			336,137
Uttarakhand				2	1	2	3	3	1	1		235,785
Jammu & Kashmir	6	7	3	1	2	2	1					214,222
Himachal Pradesh	1	2	1	2	2	1	3					109,024
Tripura		2			1			1				58,336
Meghalaya	2	3	1			1						53,648
Goa					1			1				23,315
Manipur	8	1										22,183
Chandigarh								1				18,599
Arunachal Pradesh	11	5										15,408
Nagaland	11											15,055
Puducherry	1		2					1				15,043
Dadra & Nagar Haveli								1				8,685
Mizoram	8											7,213
Andaman & Nicobar Islands		1	1	1								4,826
Sikkim	4											3,605
Daman & Diu		1	1									3,424
Lakshadweep			1									939

*Colours correspond to the colour legend of the map and the values display the number of districts

BREASTFEEDING PRACTICES

NO EARLY BREASTFEEDING
NO EXCLUSIVE BREASTFEEDING

NO EARLY BREASTFEEDING

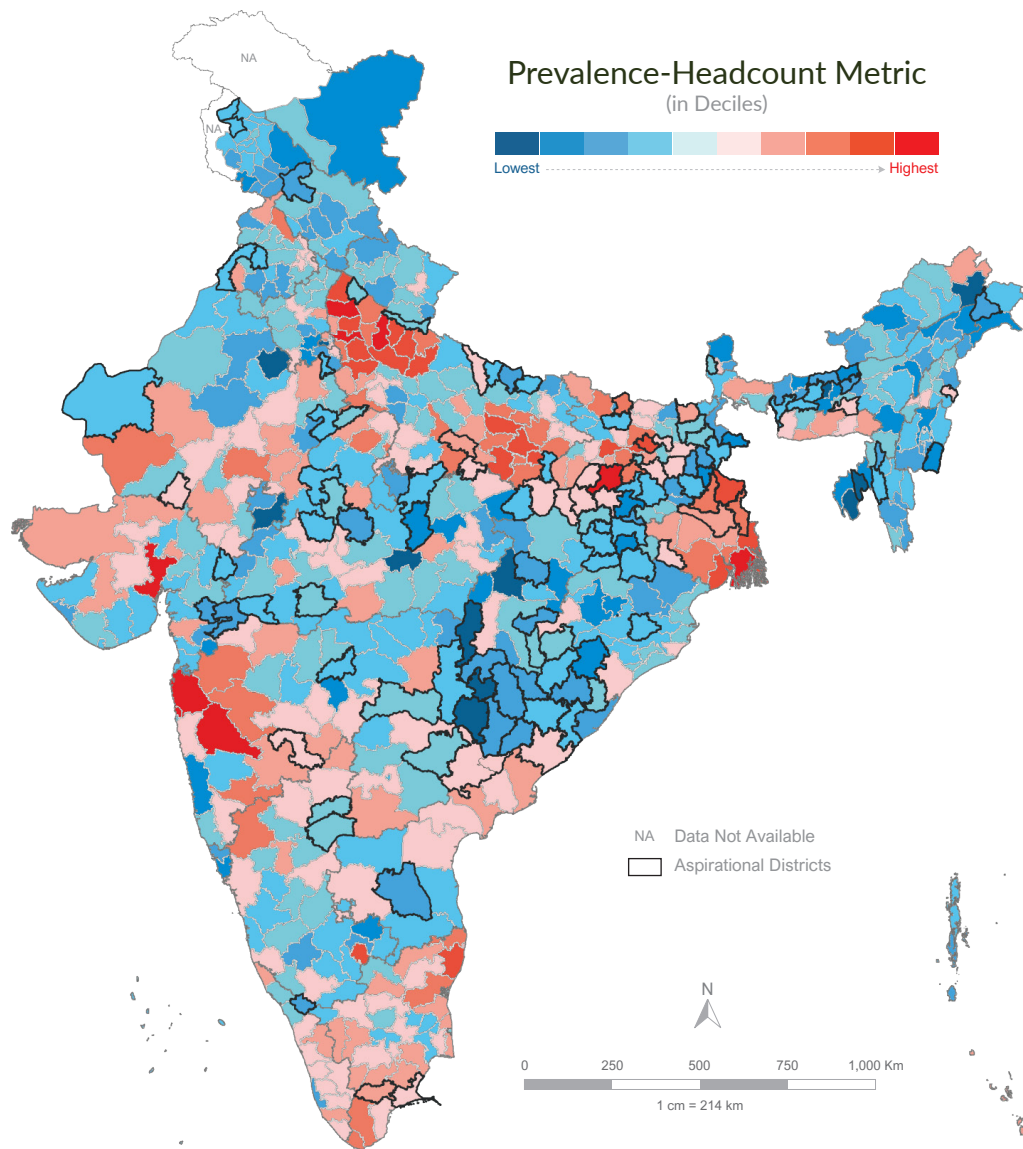


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles										Headcount
Maharashtra	1		1	1	4	2	9	7	10		1,148,499
Uttar Pradesh	22	18	14	8	3	2	3	1			1,032,570
Bihar	1	5	4	7	7	5	4	3	2		832,288
West Bengal			2	1	2		2	4	4	4	709,886
Tamil Nadu		1	2	2	1	4	2	11	2	7	661,692
Karnataka						1	5	6	7	7	639,027
Madhya Pradesh	9	6	6	11	10	3	5				555,029
Odisha								2	4	10	532,592
Gujarat		1	1	2	4	1	8	4	3	2	511,738
Rajasthan	5	10	9	3	3	3					434,457
Assam		1	1	1			1	1	13	9	416,520
Kerala		1			1	1	2	2	1	6	336,957
Andhra Pradesh	1	2	2		1	4	1	1		1	293,693
Chhattisgarh			1	3	5	4	3		1	1	256,728
Jharkhand	3	7	3	2	5	3	1				241,814
Haryana	5		3	2	4		1	4	1	1	222,087
Telangana	1		1	3	2	1	1	1			204,305
Jammu & Kashmir		1	2	7	3	5	3	1			142,426
Punjab	7	3	6	1	3						138,657
NCT of Delhi	4		3	1				1			89,985
Meghalaya				1		1	1		2	2	61,722
Uttarakhand	4	6	1			2					56,788
Himachal Pradesh	1	1		4	2	3	1				49,510
Manipur							3	4	2		33,790
Tripura					1	2	1				32,145
Nagaland		1		1	1	5	1	1	1		20,184
Mizoram							2		4	2	20,124
Goa							1			1	16,676
Arunachal Pradesh		1	3	2	2	4	2	2			16,163
Puducherry					1	1		1	1		13,588
Chandigarh						1					8,664
Sikkim						1		2	1		5,985
Dadra & Nagar Haveli					1						3,269
Andaman & Nicobar Islands		2				1					2,633
Daman & Diu								2			2,238
Lakshadweep								1			806

*Colours correspond to the colour legend of the map and the values display the number of districts

NO EXCLUSIVE BREASTFEEDING



Distribution of Districts across States*

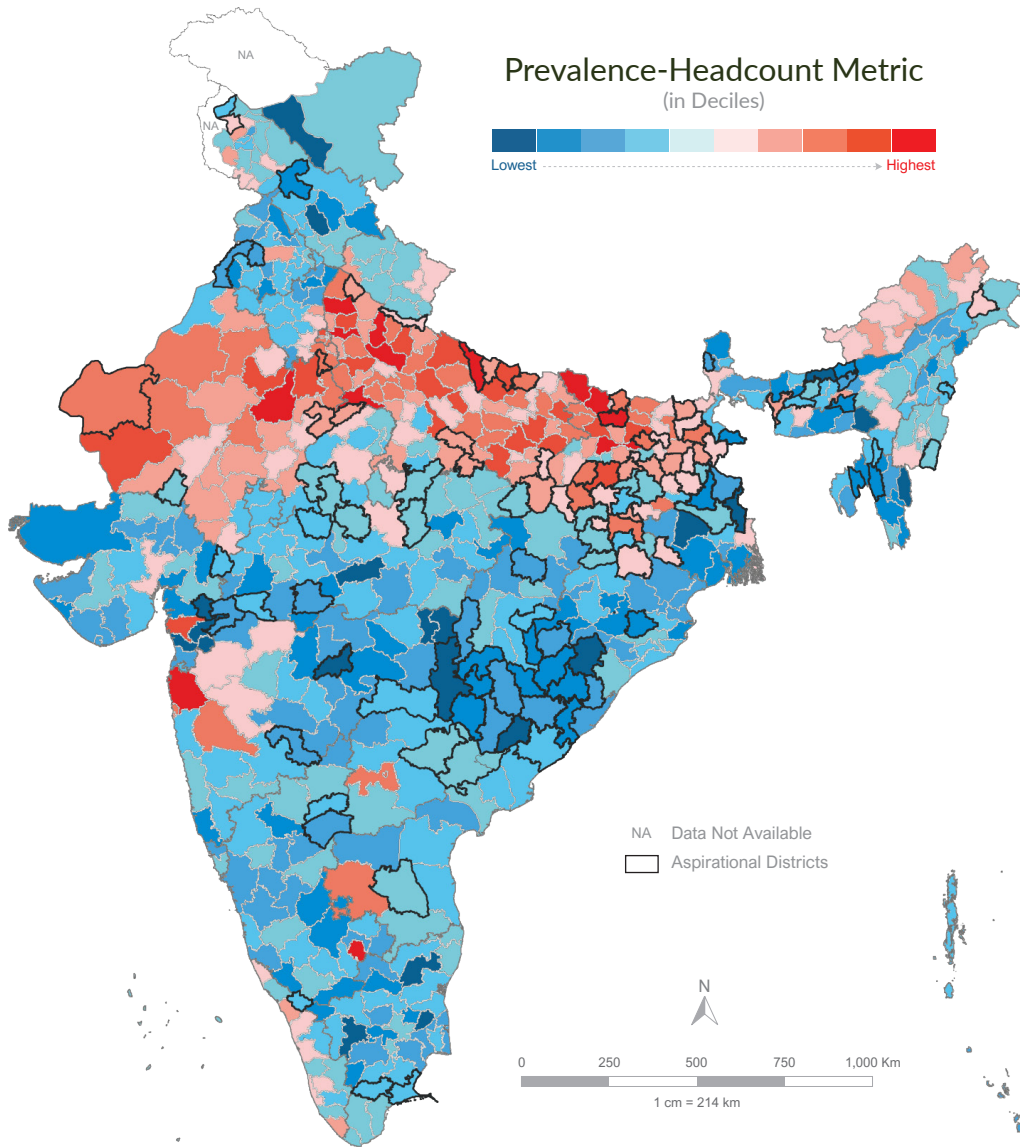
State	Prevalence-Headcount Metric Deciles										Headcount
Uttar Pradesh	2	1	4	5	3	7	4	10	6	29	2,994,760
Bihar			4	2	2	4	4	9	5	8	1,580,224
Maharashtra	2	2	1	5	4	4	1	6	4	6	1,431,837
Madhya Pradesh	7	4	5	7	6	4	7	4	5	1	1,054,424
West Bengal	1		1	2	1				6	8	1,051,333
Rajasthan	2	2	1	6	3	3	3	5	6	2	1,023,378
Tamil Nadu			1	3	1	2	7	2	11	5	882,364
Karnataka	1	2	3	4	3	5	4	4	2	2	745,064
Gujarat	1	3	4	5	2	3	2		5	1	742,599
Andhra Pradesh		2	3	1					5	2	498,725
Odisha	5	3	3	5	5	4	3	2			488,227
Jharkhand	3	5	2	4	4	2	2	2			447,455
Telangana			1			2	1	3	2	1	383,144
Kerala		2				1	1	4	3	3	382,512
Assam	9	7	4	2	1	3	1				370,077
Haryana	2	1	3			5	4	2	3	1	363,152
Punjab		1	6			2	4	1	4	1	331,735
Chhattisgarh	7	6		1	2	1			1		304,788
Jammu & Kashmir	3	3	8	2	6						198,097
NCT of Delhi	1	1	1	1		2	1		1	1	195,394
Uttarakhand		3	1			1	4	3	1		138,831
Meghalaya						1		2	1	3	76,987
Himachal Pradesh	2	5	1			2	2				75,494
Manipur	5	1		2	1						29,880
Nagaland	1			1	4	1	4				29,119
Tripura	4										28,605
Mizoram			3	2	2		1				18,753
Arunachal Pradesh	4	3	2	2	2	1	1		1		17,121
Puducherry			1	1				2			15,940
Chandigarh								1			14,259
Goa	1		1								12,554
Sikkim	1	1				1	1				6,272
Dadra & Nagar Haveli		1									4,264
Andaman & Nicobar Islands		1		1					1		4,241
Daman & Diu		1						1			2,469
Lakshadweep			1								870

*Colours correspond to the colour legend of the map and the values display the number of districts

SERVICE UTILISATION

NO HOT COOKED MEAL
NO TAKE HOME RATION
NO VIT-A SUPPLEMENTATION

NO HOT COOKED MEAL

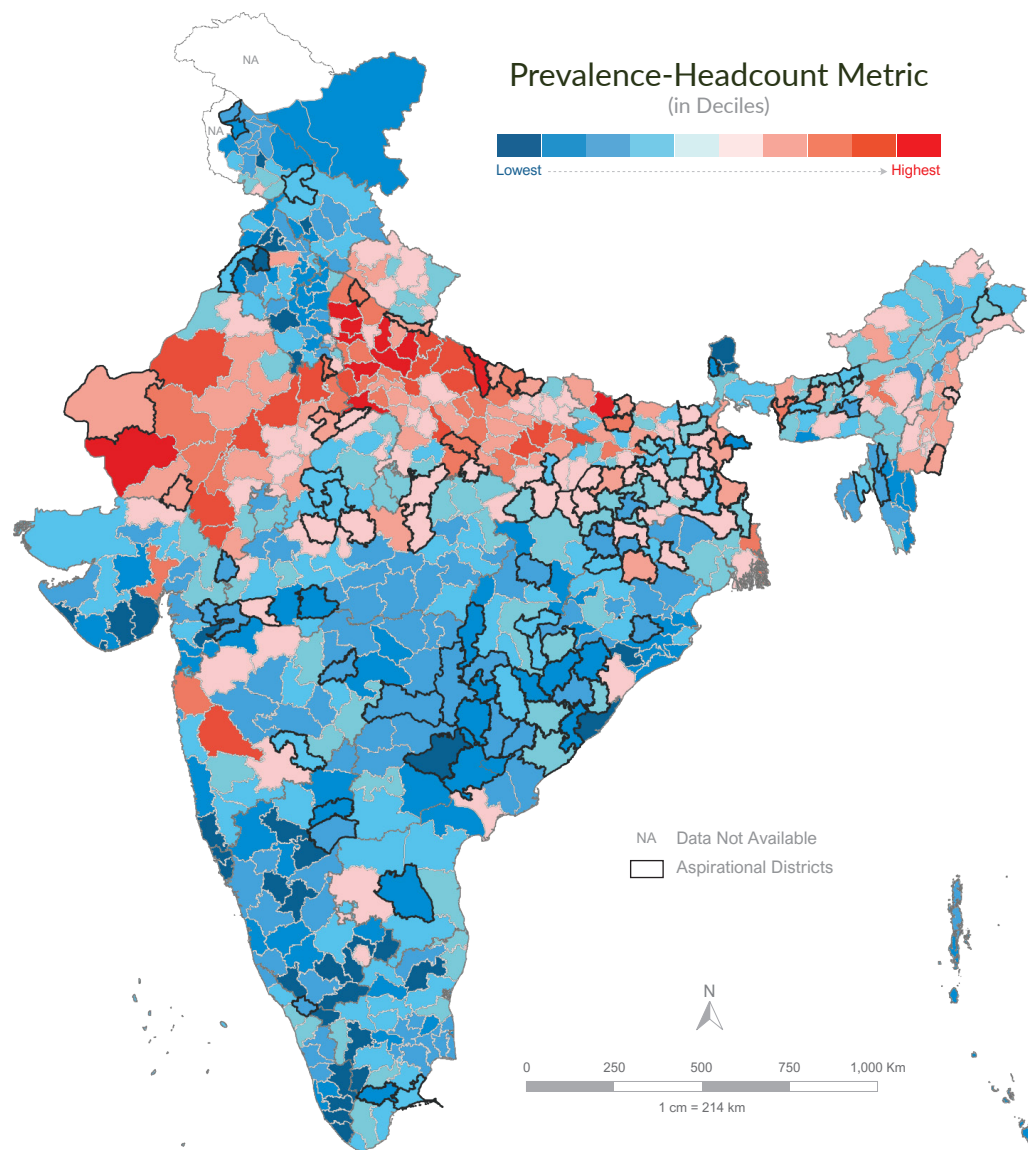


Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles										Headcount	
Uttar Pradesh				1	1	1	4	12	23	29		11,600,000
Bihar							1	8	5	13	11	6,470,233
Rajasthan				1	2	1	3	6	11	9		3,812,736
Maharashtra	8	4	6	3	5	1	4	1		3		3,013,900
Madhya Pradesh	4	4	5	10	10	11	5	1				2,591,967
Jharkhand						3	4	6	8	1	2	1,773,133
Karnataka	2	5	10	3	3	3	3				1	1,676,487
West Bengal	7	3	2	2			1	2	1		1	1,664,612
Gujarat	7	8	2	2	1	2	2	1		1		1,647,702
Tamil Nadu	6	5	3	8	4	4	2					1,535,003
Assam	4	4	3	3	7	1	1	4				1,131,619
Andhra Pradesh	1	1	3	1	4	1	1			1		1,106,114
Kerala				2	1	1	6	3	1			1,013,511
Odisha	9	8	6	4	1	2						1,004,957
Telangana		1		2	2	3				1	1	1,003,493
Haryana	1	3	2	5	2				3	3	2	986,290
NCT of Delhi									1	4	4	824,196
Chhattisgarh	1	5	6		3	3						774,132
Punjab	1	5	5	3	3	1	1	1				707,746
Jammu & Kashmir	1		1	2	3	6	4	4	1			625,338
Uttarakhand						5	5	1	2			476,818
Himachal Pradesh	2	2		5	1	2						175,852
Manipur							4	4	1			127,806
Meghalaya	3	1	1	1					1			108,053
Tripura	2		1		1							96,173
Nagaland		1		3	3	2			1			86,092
Arunachal Pradesh	1					4		8	3			79,497
Goa			1					1				39,304
Chandigarh						1						31,816
Mizoram	4	2	1		1							30,786
Puducherry			2	1				1				27,709
Sikkim		2	1	1								15,626
Dadra & Nagar Haveli				1								12,359
Andaman & Nicobar Islands			1		2							11,605
Daman & Diu			1						1			9,883
Lakshadweep								1				2,470

*Colours correspond to the colour legend of the map and the values display the number of districts

NO VIT-A SUPPLEMENTATION



Distribution of Districts across States*

State	Prevalence-Headcount Metric Deciles										Headcount
Uttar Pradesh					2	1	4	9	16	39	11,600,000
Bihar					7	6	7	9	6	3	4,740,470
Rajasthan					2	2	1	4	11	13	4,076,434
Madhya Pradesh			2	8	7	7	5	12	7	2	2,845,295
Maharashtra	1	7	8	7	1	4	2	2	1	2	2,725,676
West Bengal		1	1	2	1	5	3	1	3	2	2,379,038
Jharkhand					5	1	4	5	6	3	1,605,530
Tamil Nadu		7	1	4	3	8	5	3	1		1,589,760
Gujarat		5	5	3	3	5	2	1	1	1	1,523,167
Assam				1	4	2	6	8	1	3	1,491,202
Odisha		5	8	3	4	4	3	2	1		1,095,293
Karnataka		14	4	7	3		1		1		1,039,010
Andhra Pradesh		1	3	2	2	1	1	1	2		965,807
Chhattisgarh		1	5	3	3	2	3	1			745,771
Haryana		7	3	2	3	2	1	1	1	1	736,880
Telangana		1	2	3	2	1	1				625,522
Punjab		6	5	2	2	4				1	611,867
Kerala		5	1	3	2	1	1	1			594,533
NCT of Delhi				1		2	1	2	2	1	572,026
Uttarakhand							2	2	5	3	548,186
Jammu & Kashmir		2	4	6	4	1	1	3	1		468,298
Himachal Pradesh		1	2	2	3	2	2				188,159
Meghalaya		1			1	2		2	1		179,709
Manipur							1		3	5	170,168
Nagaland					1			1	3	6	129,463
Tripura						1		1			114,120
Arunachal Pradesh				1		4	4	1	3	3	80,715
Mizoram			5	1	1		1				37,112
Chandigarh							1				33,774
Puducherry			4								23,611
Dadra & Nagar Haveli						1					14,261
Goa		2									11,454
Andaman & Nicobar Islands			2		1						9,036
Sikkim		4									7,034
Daman & Diu		1		1							5,758
Lakshadweep									1		2,236

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